

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A2W

☐ Check if different than previously reported. (ACC)

Northbrook

IL

60062

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00040253

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer

Mario Rizzo

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
12 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		36833.08
(b) Cash on Hand at Beginning of Reporting Period.....	66995.73	
(c) Total Receipts (from Line 19)	21373.59	279468.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	88369.32	316301.56
7. Total Disbursements (from Line 31)	33386.68	261318.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	54982.64	54982.64
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			01			2015					

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2015					

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date
11. Contributions (other than loans) From:**(a) Individuals/Persons Other**

Than Political Committees

(i) Itemized (use Schedule A).....

20804.81

220533.59

(ii) Unitemized

568.78

58934.89

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

21373.59

279468.48

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

21373.59

279468.48

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds**(a) Non-Federal Account**

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

**19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶**

21373.59

279468.48

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

21373.59

279468.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	136.68	1408.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	136.68	1408.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	189500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	9250.00	70410.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33386.68	261318.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33386.68	261318.92

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	21373.59	279468.48
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21373.59	279468.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	136.68	1408.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	136.68	1408.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

647.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	1	5

Transaction ID : A2015-2681765

Amount of Each Receipt this Period

26.18

Full Name (Last, First, Middle Initial)

B. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

674.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	5

Transaction ID : A2015-2827546

Amount of Each Receipt this Period

26.18

Full Name (Last, First, Middle Initial)

C. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Service Manager-Exp

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	1	5

Transaction ID : A2015-2681708

Amount of Each Receipt this Period

16.84

SUBTOTAL of Receipts This Page (optional)..... ►

69.20

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City
COLLEYVILLEState
TXZip Code
76034FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Service Manager-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827490

Amount of Each Receipt this Period

16.84

Full Name (Last, First, Middle Initial)

B. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City
ScottsdaleState
AZZip Code
85255FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681545

Amount of Each Receipt this Period

23.55

Full Name (Last, First, Middle Initial)

C. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City
ScottsdaleState
AZZip Code
85255FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827327

Amount of Each Receipt this Period

23.55

SUBTOTAL of Receipts This Page (optional)..... ►

63.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse Unit 508

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681712

Amount of Each Receipt this Period

34.36

Full Name (Last, First, Middle Initial)

B. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse Unit 508

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

888.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827494

Amount of Each Receipt this Period

34.36

Full Name (Last, First, Middle Initial)

C. WILLIAM P BALLINGER

Mailing Address 61 Tournament Dr N

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PO-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1161.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681586

Amount of Each Receipt this Period

58.00

SUBTOTAL of Receipts This Page (optional)..... ►

126.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 197
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM P BALLINGER

Mailing Address 61 Tournament Dr N

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PO-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1219.01

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827370

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

B. PHILLIP W BANET

Mailing Address 1975 Merlot Ct

City State Zip Code
Wheeling IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PIM-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1089.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681613

Amount of Each Receipt this Period

43.90

Full Name (Last, First, Middle Initial)

C. PHILLIP W BANET

Mailing Address 1975 Merlot Ct

City State Zip Code
Wheeling IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PIM-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1133.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827397

Amount of Each Receipt this Period

43.90

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT K BECKER

Mailing Address 5 Greensview Lane

City State Zip Code
 Scotch Plains NJ 07076

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.40

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681558

Amount of Each Receipt this Period

30.63

Full Name (Last, First, Middle Initial)

B. ROBERT K BECKER

Mailing Address 5 Greensview Lane

City State Zip Code
 Scotch Plains NJ 07076

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.03

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827341

Amount of Each Receipt this Period

30.63

Full Name (Last, First, Middle Initial)

C. DWAYNE A BELL

Mailing Address 309 YORK DRIVE

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Strategic Operations-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.27

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681717

Amount of Each Receipt this Period

14.01

SUBTOTAL of Receipts This Page (optional)..... ►

75.27

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 197

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DWAYNE A BELL

Mailing Address 309 YORK DRIVE

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Strategic Operations-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.28

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827499

Amount of Each Receipt this Period

14.01

Full Name (Last, First, Middle Initial)

B. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting Research-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.73

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681641

Amount of Each Receipt this Period

23.31

Full Name (Last, First, Middle Initial)

C. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting Research-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.04

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827424

Amount of Each Receipt this Period

23.31

SUBTOTAL of Receipts This Page (optional)..... ►

60.63

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City	State	Zip Code
NAPERVILLE	IL	60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Architect-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

943.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681680

Amount of Each Receipt this Period

37.88

Full Name (Last, First, Middle Initial)

B. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City	State	Zip Code
NAPERVILLE	IL	60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Architect-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827463

Amount of Each Receipt this Period

37.88

Full Name (Last, First, Middle Initial)

C. ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City	State	Zip Code
LINCOLN	NE	68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AgentSvc-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681682

Amount of Each Receipt this Period

20.45

SUBTOTAL of Receipts This Page (optional)..... ►

96.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City
LINCOLNState
NEZip Code
68516FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AgentSvc-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827465

Amount of Each Receipt this Period

20.45

Full Name (Last, First, Middle Initial)

B. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City
LoomisState
CAZip Code
95650FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681766

Amount of Each Receipt this Period

16.85

Full Name (Last, First, Middle Initial)

C. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City
LoomisState
CAZip Code
95650FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827547

Amount of Each Receipt this Period

16.85

SUBTOTAL of Receipts This Page (optional)..... ►

54.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DOUGLAS L BORG

Mailing Address 11988 Crafton Hills Crt

City	State	Zip Code
Yucaipa	CA	92399

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Financial Sales Consu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

837.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681761

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

B. DOUGLAS L BORG

Mailing Address 11988 Crafton Hills Crt

City	State	Zip Code
Yucaipa	CA	92399

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Financial Sales Consu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.74

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827542

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

C. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City	State	Zip Code
ARLINGTON HTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AB2B-Head of Strategic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.77

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681640

Amount of Each Receipt this Period

32.60

SUBTOTAL of Receipts This Page (optional)..... ►

99.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City	State	Zip Code
ARLINGTON HTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AB2B-Head of Strategic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827423

Amount of Each Receipt this Period

32.60

Full Name (Last, First, Middle Initial)

B. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City	State	Zip Code
LINCOLN	NE	68526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681746

Amount of Each Receipt this Period

17.50

Full Name (Last, First, Middle Initial)

C. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City	State	Zip Code
LINCOLN	NE	68526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827527

Amount of Each Receipt this Period

17.50

SUBTOTAL of Receipts This Page (optional)..... ►

67.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LONDON B BRADLEY

Mailing Address 6350 S Langdale Way

City State Zip Code
 Aurora CO 80016

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1042.38

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681751

Amount of Each Receipt this Period

43.29

Full Name (Last, First, Middle Initial)

B. LONDON B BRADLEY

Mailing Address 6350 S Langdale Way

City State Zip Code
 Aurora CO 80016

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1085.67

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827532

Amount of Each Receipt this Period

43.29

Full Name (Last, First, Middle Initial)

C. DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.94

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681580

Amount of Each Receipt this Period

21.84

SUBTOTAL of Receipts This Page (optional)..... ►

108.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.78

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827364

Amount of Each Receipt this Period

21.84

Full Name (Last, First, Middle Initial)

B. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLAIMS-Technical Execu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.34

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681645

Amount of Each Receipt this Period

55.57

Full Name (Last, First, Middle Initial)

C. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLAIMS-Technical Execu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1435.91

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827428

Amount of Each Receipt this Period

55.57

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.91

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681704

Amount of Each Receipt this Period

21.63

Full Name (Last, First, Middle Initial)

B. PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.54

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827486

Amount of Each Receipt this Period

21.63

Full Name (Last, First, Middle Initial)

C. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code
 WINFIELD IL 60190

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.35

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681696

Amount of Each Receipt this Period

18.78

SUBTOTAL of Receipts This Page (optional)..... ►

62.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 197
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code
 WINFIELD IL 60190

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.13

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827479

Amount of Each Receipt this Period

18.78

Full Name (Last, First, Middle Initial)

B. CHERI M BUCKLEY

Mailing Address 215 5th Street

City State Zip Code
 Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.85

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681701

Amount of Each Receipt this Period

13.67

Full Name (Last, First, Middle Initial)

C. CHERI M BUCKLEY

Mailing Address 215 5th Street

City State Zip Code
 Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.52

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827483

Amount of Each Receipt this Period

13.67

SUBTOTAL of Receipts This Page (optional)..... ►

46.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City	State	Zip Code
Antioch	IL	60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681643

Amount of Each Receipt this Period

17.10

Full Name (Last, First, Middle Initial)

B. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City	State	Zip Code
Antioch	IL	60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827426

Amount of Each Receipt this Period

17.10

Full Name (Last, First, Middle Initial)

C. TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681577

Amount of Each Receipt this Period

18.05

SUBTOTAL of Receipts This Page (optional)..... ►

52.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827361

Amount of Each Receipt this Period

18.05

Full Name (Last, First, Middle Initial)

B. GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1502.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681573

Amount of Each Receipt this Period

60.35

Full Name (Last, First, Middle Initial)

C. GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1562.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827356

Amount of Each Receipt this Period

60.35

SUBTOTAL of Receipts This Page (optional)..... ►

138.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City State Zip Code
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2349.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681724

Amount of Each Receipt this Period

94.81

Full Name (Last, First, Middle Initial)

B. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City State Zip Code
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2444.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827506

Amount of Each Receipt this Period

94.81

Full Name (Last, First, Middle Initial)

C. Alfredo M Cantoral

Mailing Address 1960 Clyde Dr

City State Zip Code
 Naperville IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681802

Amount of Each Receipt this Period

27.80

SUBTOTAL of Receipts This Page (optional)..... ►

217.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Alfredo M Cantoral

Mailing Address 1960 Clyde Dr

City
NapervilleState
IL Zip Code
60565FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827583

Amount of Each Receipt this Period

27.80

Full Name (Last, First, Middle Initial)

B. Michael Capuzzi

Mailing Address 2630 W. Winona Street

City
ChicagoState
IL Zip Code
60625FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLAIMS-Regional Claim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681815

Amount of Each Receipt this Period

41.54

Full Name (Last, First, Middle Initial)

C. Michael Capuzzi

Mailing Address 2630 W. Winona Street

City
ChicagoState
IL Zip Code
60625FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLAIMS-Regional Claim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827596

Amount of Each Receipt this Period

41.54

SUBTOTAL of Receipts This Page (optional)..... ►

110.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARIANNE K CARL

Mailing Address 860 Morningside Dr

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.69

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681783

Amount of Each Receipt this Period

12.43

Full Name (Last, First, Middle Initial)

B. MARIANNE K CARL

Mailing Address 860 Morningside Dr

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827564

Amount of Each Receipt this Period

12.43

Full Name (Last, First, Middle Initial)

C. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Communications-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.33

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681685

Amount of Each Receipt this Period

22.13

SUBTOTAL of Receipts This Page (optional)..... ►

46.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Communications-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.46

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827468

Amount of Each Receipt this Period

22.13

Full Name (Last, First, Middle Initial)

B. BRIAN L CLARK

Mailing Address 257 Lake Circle

City

MADISON

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.49

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681732

Amount of Each Receipt this Period

19.94

Full Name (Last, First, Middle Initial)

C. BRIAN L CLARK

Mailing Address 257 Lake Circle

City

MADISON

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.43

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827514

Amount of Each Receipt this Period

19.94

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.01

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWARD T CLARK

Mailing Address 9484 Ashford Place

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

794.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681690

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

B. EDWARD T CLARK

Mailing Address 9484 Ashford Place

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

826.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827473

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

C. KELLY A CLARK

Mailing Address 258 FOXFORD DR

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

491.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681711

Amount of Each Receipt this Period

20.61

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KELLY A CLARK

Mailing Address 258 FOXFORD DR

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.81

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827493

Amount of Each Receipt this Period

20.61

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER W CLAY

Mailing Address 9832 Toscano Drive

City

ELK GROVE

State

CA

Zip Code

95757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.74

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681781

Amount of Each Receipt this Period

37.55

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER W CLAY

Mailing Address 9832 Toscano Drive

City

ELK GROVE

State

CA

Zip Code

95757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.29

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827562

Amount of Each Receipt this Period

37.55

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional Field-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.72

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681688

Amount of Each Receipt this Period

34.75

Full Name (Last, First, Middle Initial)

B. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional Field-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

897.47

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827471

Amount of Each Receipt this Period

34.75

Full Name (Last, First, Middle Initial)

C. PATRICK E COCHRANE

Mailing Address 6911 Brimstone Lane

City State Zip Code
 Fairfax Station VA 22039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.63

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681593

Amount of Each Receipt this Period

17.47

SUBTOTAL of Receipts This Page (optional)..... ►

86.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK E COCHRANE

Mailing Address 6911 Brimstone Lane

City State Zip Code
 Fairfax Station VA 22039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.10

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827377

Amount of Each Receipt this Period

17.47

Full Name (Last, First, Middle Initial)

B. PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV-Delivery & Risk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.38

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681669

Amount of Each Receipt this Period

36.72

Full Name (Last, First, Middle Initial)

C. PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV-Delivery & Risk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.10

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827452

Amount of Each Receipt this Period

36.72

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.91

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1335.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681637

Amount of Each Receipt this Period

53.74

Full Name (Last, First, Middle Initial)

B. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827420

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

C. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City	State	Zip Code
Palatine	IL	60067

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681657

Amount of Each Receipt this Period

21.79

SUBTOTAL of Receipts This Page (optional)..... ►

104.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

564.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827440

Amount of Each Receipt this Period

21.79

Full Name (Last, First, Middle Initial)

B. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City

GREEN OAKS

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV-Group CIO Person

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1762.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681543

Amount of Each Receipt this Period

70.75

Full Name (Last, First, Middle Initial)

C. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City

GREEN OAKS

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV-Group CIO Person

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1833.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827325

Amount of Each Receipt this Period

70.75

SUBTOTAL of Receipts This Page (optional)..... ►

163.29

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ERROL CRAMER

Mailing Address 1111 SARANAC LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681671

Amount of Each Receipt this Period

19.37

Full Name (Last, First, Middle Initial)

B. ERROL CRAMER

Mailing Address 1111 SARANAC LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827454

Amount of Each Receipt this Period

19.37

Full Name (Last, First, Middle Initial)

C. Teresa J Dalenta

Mailing Address 528 Cumnor Court

City	State	Zip Code
Deerfield	IL	60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PO-Product Line Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681810

Amount of Each Receipt this Period

40.38

SUBTOTAL of Receipts This Page (optional)..... ►

79.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Teresa J Dalenta

Mailing Address 528 Cumnor Court

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PO-Product Line Manag

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1009.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827591

Amount of Each Receipt this Period

40.38

Full Name (Last, First, Middle Initial)

B. JOHN A DAVISON

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Sr M

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

486.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681600

Amount of Each Receipt this Period

19.60

Full Name (Last, First, Middle Initial)

C. JOHN A DAVISON

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Sr M

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

505.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827384

Amount of Each Receipt this Period

19.60

SUBTOTAL of Receipts This Page (optional)..... ►

79.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RANDALL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Agency Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1188.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681638

Amount of Each Receipt this Period

47.93

Full Name (Last, First, Middle Initial)

B. RANDALL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Agency Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1236.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827421

Amount of Each Receipt this Period

47.93

Full Name (Last, First, Middle Initial)

C. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1465.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681700

Amount of Each Receipt this Period

58.91

SUBTOTAL of Receipts This Page (optional)..... ►

154.77

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City
ELMHURST

State Zip Code
IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827482

Amount of Each Receipt this Period

58.91

Full Name (Last, First, Middle Initial)

B. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City
BARRINGTON

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681683

Amount of Each Receipt this Period

23.50

Full Name (Last, First, Middle Initial)

C. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City
BARRINGTON

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.66

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827466

Amount of Each Receipt this Period

23.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.91

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kristine DiGirolamo

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code
 BARRINGTON HILLS IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.09

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681725

Amount of Each Receipt this Period

22.27

Full Name (Last, First, Middle Initial)

B. Kristine DiGirolamo

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code
 BARRINGTON HILLS IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.36

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827507

Amount of Each Receipt this Period

22.27

Full Name (Last, First, Middle Initial)

C. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City State Zip Code
 Northfield IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1691.71

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681786

Amount of Each Receipt this Period

68.14

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 197
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City State Zip Code
 Northfield IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1759.85

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827567

Amount of Each Receipt this Period

68.14

Full Name (Last, First, Middle Initial)

B. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
 Lincolnwood IL 60712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.77

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681743

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

C. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
 Lincolnwood IL 60712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.82

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827524

Amount of Each Receipt this Period

22.05

SUBTOTAL of Receipts This Page (optional)..... ►

112.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Heather C Dougherty

Mailing Address 12 Laurel Street

City State Zip Code
 Rye NY 10580

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Financial Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.26

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681780

Amount of Each Receipt this Period

18.75

Full Name (Last, First, Middle Initial)

B. Heather C Dougherty

Mailing Address 12 Laurel Street

City State Zip Code
 Rye NY 10580

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Financial Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.01

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827561

Amount of Each Receipt this Period

18.75

Full Name (Last, First, Middle Initial)

C. DANIEL C DRESSEL

Mailing Address 1706 ADLER LANE

City State Zip Code
 MALVERN PA 19355

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.21

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681579

Amount of Each Receipt this Period

22.77

SUBTOTAL of Receipts This Page (optional)..... ►

60.27

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DANIEL C DRESSEL

Mailing Address 1706 ADLER LANE

City
MALVERNState
PAZip Code
19355FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827363

Amount of Each Receipt this Period

22.77

Full Name (Last, First, Middle Initial)

B. PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City
VERNON HILLSState
ILZip Code
60061FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CCC-Contact Center Strate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681627

Amount of Each Receipt this Period

37.99

Full Name (Last, First, Middle Initial)

C. PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City
VERNON HILLSState
ILZip Code
60061FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CCC-Contact Center Strate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827410

Amount of Each Receipt this Period

37.99

SUBTOTAL of Receipts This Page (optional)..... ►

98.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stacy Drumtra

Mailing Address 114 E. Euclid Ave

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Corporate Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.37

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681787

Amount of Each Receipt this Period

37.08

Full Name (Last, First, Middle Initial)

B. Stacy Drumtra

Mailing Address 114 E. Euclid Ave

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Corporate Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

958.45

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827568

Amount of Each Receipt this Period

37.08

Full Name (Last, First, Middle Initial)

C. SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City State Zip Code
 DOWNERS GROVE IL 60515

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.71

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681777

Amount of Each Receipt this Period

16.10

SUBTOTAL of Receipts This Page (optional)..... ►

90.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City State Zip Code
 DOWNERS GROVE IL 60515

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.81

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827558

Amount of Each Receipt this Period

16.10

Full Name (Last, First, Middle Initial)

B. DONALD L DUFF

Mailing Address 2 Washington Ct..

City State Zip Code
 STREAMWOOD IL 60107

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

947.62

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681626

Amount of Each Receipt this Period

39.13

Full Name (Last, First, Middle Initial)

C. DONALD L DUFF

Mailing Address 2 Washington Ct..

City State Zip Code
 STREAMWOOD IL 60107

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.75

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827409

Amount of Each Receipt this Period

39.13

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

94.36

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Pamela N Dufour

Mailing Address 1804 Aberdeen Drive

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AB2B-President-ALL Ro

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

640.81

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681821

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

B. Pamela N Dufour

Mailing Address 1804 Aberdeen Drive

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AB2B-President-ALL Ro

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

673.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827602

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

C. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City

ROSCOE

State

IL

Zip Code

61073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Project Mgmt-Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

747.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681676

Amount of Each Receipt this Period

30.05

SUBTOTAL of Receipts This Page (optional)..... ►

94.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 44 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

 City
 ROSCOE

 State
 IL

 Zip Code
 61073

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Project Mgmt-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827459

Amount of Each Receipt this Period

30.05

Full Name (Last, First, Middle Initial)

B. JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City

MANAHAWKIN

State

NJ

Zip Code

08050

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681542

Amount of Each Receipt this Period

16.62

Full Name (Last, First, Middle Initial)

C. JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City

MANAHAWKIN

State

NJ

Zip Code

08050

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827324

Amount of Each Receipt this Period

16.62

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

63.29

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 197

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MATTHEW B EBY

Mailing Address 605 Downing Road

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.60

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681720

Amount of Each Receipt this Period

16.35

Full Name (Last, First, Middle Initial)

B. MATTHEW B EBY

Mailing Address 605 Downing Road

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.95

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827502

Amount of Each Receipt this Period

16.35

Full Name (Last, First, Middle Initial)

C. Miguel Edwards

Mailing Address 21 Seneca Ave West

City

Hathorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AIA-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1148.17

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681812

Amount of Each Receipt this Period

46.13

SUBTOTAL of Receipts This Page (optional)..... ►

78.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Miguel Edwards

Mailing Address 21 Seneca Ave West

City State Zip Code
Hathorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AIA-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1194.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827593

Amount of Each Receipt this Period

46.13

Full Name (Last, First, Middle Initial)

B. SHARON P EDWARDS

Mailing Address 469 E. HOME AVENUE

City State Zip Code
PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Financial Planning-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.87

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681644

Amount of Each Receipt this Period

11.81

Full Name (Last, First, Middle Initial)

C. SHARON P EDWARDS

Mailing Address 469 E. HOME AVENUE

City State Zip Code
PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Financial Planning-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.68

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827427

Amount of Each Receipt this Period

11.81

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City
CHICAGO

State Zip Code
IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.25

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681693

Amount of Each Receipt this Period

53.85

Full Name (Last, First, Middle Initial)

B. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City
CHICAGO

State Zip Code
IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.10

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827476

Amount of Each Receipt this Period

53.85

Full Name (Last, First, Middle Initial)

C. JAN B EPSTEIN

Mailing Address 2975 ROSLYN LANE

City
BUFFALO GROVE

State Zip Code
IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.68

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681553

Amount of Each Receipt this Period

20.57

SUBTOTAL of Receipts This Page (optional)..... ►

128.27

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAN B EPSTEIN

Mailing Address 2975 ROSLYN LANE

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827335

Amount of Each Receipt this Period

20.57

Full Name (Last, First, Middle Initial)

B. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City	State	Zip Code
INVERNESS	IL	60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1490.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681546

Amount of Each Receipt this Period

59.77

Full Name (Last, First, Middle Initial)

C. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City	State	Zip Code
INVERNESS	IL	60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1549.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827328

Amount of Each Receipt this Period

59.77

SUBTOTAL of Receipts This Page (optional)..... ►

140.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KARI C FAIR

Mailing Address 1391 ANTHONY ROAD

City
WHEELINGState Zip Code
IL 60090FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681782

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. KARI C FAIR

Mailing Address 1391 ANTHONY ROAD

City
WHEELINGState Zip Code
IL 60090FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827563

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Marcus W Ferguson

Mailing Address 818 S. Mitchell Ave.

City
Arlington HeightsState Zip Code
IL 60005FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681817

Amount of Each Receipt this Period

30.30

SUBTOTAL of Receipts This Page (optional)..... ►

70.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Marcus W Ferguson

Mailing Address 818 S. Mitchell Ave.

City State Zip Code
 Arlington Heights IL 60005

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.45

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827598

Amount of Each Receipt this Period

30.30

Full Name (Last, First, Middle Initial)

B. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

828.50

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681715

Amount of Each Receipt this Period

33.32

Full Name (Last, First, Middle Initial)

C. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

861.82

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827497

Amount of Each Receipt this Period

33.32

SUBTOTAL of Receipts This Page (optional)..... ►

96.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 197

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City
ANTIOCH

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681571

Amount of Each Receipt this Period

29.03

Full Name (Last, First, Middle Initial)

B. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City
ANTIOCH

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.21

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827354

Amount of Each Receipt this Period

29.03

Full Name (Last, First, Middle Initial)

C. James J Flynn

Mailing Address 5 Sunset Terrace

City
West Hartford

State Zip Code
CT 06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

934.65

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681824

Amount of Each Receipt this Period

62.31

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.37

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 52 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. James J Flynn

Mailing Address 5 Sunset Terrace

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

996.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827605

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

B. ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Allstate Financial

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1418.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			11			2015					

Transaction ID : A2015-2681745

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

C. ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Allstate Financial

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1476.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827526

Amount of Each Receipt this Period

58.00

SUBTOTAL of Receipts This Page (optional)..... ►

178.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681544

Amount of Each Receipt this Period

28.50

Full Name (Last, First, Middle Initial)

B. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827326

Amount of Each Receipt this Period

28.50

Full Name (Last, First, Middle Initial)

C. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Operations-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.44

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681622

Amount of Each Receipt this Period

18.32

SUBTOTAL of Receipts This Page (optional)..... ►

75.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City	State	Zip Code
CRYSTAL LAKE	IL	60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Operations-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827405

Amount of Each Receipt this Period

18.32

Full Name (Last, First, Middle Initial)

B. MARY C GARDNER

Mailing Address 4506 DEER TRAIL

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681575

Amount of Each Receipt this Period

14.22

Full Name (Last, First, Middle Initial)

C. MARY C GARDNER

Mailing Address 4506 DEER TRAIL

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827359

Amount of Each Receipt this Period

14.22

SUBTOTAL of Receipts This Page (optional)..... ►

46.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Oyauma M Garrison

Mailing Address 8033 Slate Park Avenue

City	State	Zip Code
Reynoldsburg	OH	43068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681823

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

B. Oyauma M Garrison

Mailing Address 8033 Slate Park Avenue

City	State	Zip Code
Reynoldsburg	OH	43068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827604

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

C. NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681662

Amount of Each Receipt this Period

42.05

SUBTOTAL of Receipts This Page (optional)..... ►

158.05

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1087.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827445

Amount of Each Receipt this Period

42.05

Full Name (Last, First, Middle Initial)

B. Cheryl Gidley

Mailing Address 27026 W. Lake Shore Drive

City	State	Zip Code
Tower Lakes	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ops Supt-Improvements Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2015

Transaction ID : A2015-2661523

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City	State	Zip Code
HOFFMAN ESTATES	IL	60169

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681747

Amount of Each Receipt this Period

34.88

SUBTOTAL of Receipts This Page (optional)..... ►

326.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
 HOFFMAN ESTATES IL 60169

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.06

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827528

Amount of Each Receipt this Period

34.88

Full Name (Last, First, Middle Initial)

B. ROBERT G GILLMAN

Mailing Address 99 E Benton CT

City State Zip Code
 Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-ATSV-Testing & Release

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 18 2015

Transaction ID : A2015-2745047

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. JOAN M GILMORE

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1171.07

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681547

Amount of Each Receipt this Period

47.01

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

831.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOAN M GILMORE

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827329

Amount of Each Receipt this Period

47.01

Full Name (Last, First, Middle Initial)

B. JAMES D GLENN

Mailing Address 1038 N. Glenview Court

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681582

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

C. JAMES D GLENN

Mailing Address 1038 N. Glenview Court

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827366

Amount of Each Receipt this Period

39.00

SUBTOTAL of Receipts This Page (optional)..... ►

125.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City	State	Zip Code
Roswell	GA	30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681548

Amount of Each Receipt this Period

23.94

Full Name (Last, First, Middle Initial)

B. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City	State	Zip Code
Roswell	GA	30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827330

Amount of Each Receipt this Period

23.94

Full Name (Last, First, Middle Initial)

C. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681630

Amount of Each Receipt this Period

23.05

SUBTOTAL of Receipts This Page (optional)..... ►

70.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 197

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.79

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827413

Amount of Each Receipt this Period

23.05

Full Name (Last, First, Middle Initial)

B. RICHARD M GOLICK

Mailing Address 2372 SIMPSON FARM WAY

City State Zip Code
 SMYRNA GA 30080

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1088.38

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681771

Amount of Each Receipt this Period

43.69

Full Name (Last, First, Middle Initial)

C. RICHARD M GOLICK

Mailing Address 2372 SIMPSON FARM WAY

City State Zip Code
 SMYRNA GA 30080

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1132.07

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827552

Amount of Each Receipt this Period

43.69

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Daniel Gordon

Mailing Address 25225 North Iroquois Court

City State Zip Code
 Lake Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-L&R-Securities & Corpo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681820

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

B. Daniel Gordon

Mailing Address 25225 North Iroquois Court

City State Zip Code
 Lake Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-L&R-Securities & Corpo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827601

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

C. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

929.22

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681768

Amount of Each Receipt this Period

37.30

SUBTOTAL of Receipts This Page (optional)..... ►

115.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

966.52

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827549

Amount of Each Receipt this Period

37.30

Full Name (Last, First, Middle Initial)

B. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-L&R-Staff & Retained

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.81

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681602

Amount of Each Receipt this Period

56.50

Full Name (Last, First, Middle Initial)

C. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-L&R-Staff & Retained

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1461.31

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827386

Amount of Each Receipt this Period

56.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KELLIE H GREEN

Mailing Address 150 Meadowlark Circle

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-RMBC Underwriting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.97

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681591

Amount of Each Receipt this Period

20.79

Full Name (Last, First, Middle Initial)

B. KELLIE H GREEN

Mailing Address 150 Meadowlark Circle

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-RMBC Underwriting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.76

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827375

Amount of Each Receipt this Period

20.79

Full Name (Last, First, Middle Initial)

C. Mark A Green

Mailing Address 1711 Wildwood Ct

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AB2B-President Encomp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1696.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681795

Amount of Each Receipt this Period

68.35

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.93

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Mark A Green

Mailing Address 1711 Wildwood Ct

City
GlenviewState
ILZip Code
60025FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AB2B-President Encomp

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1765.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827576

Amount of Each Receipt this Period

68.35

Full Name (Last, First, Middle Initial)

B. JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2003.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681611

Amount of Each Receipt this Period

80.77

Full Name (Last, First, Middle Initial)

C. JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2084.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827395

Amount of Each Receipt this Period

80.77

SUBTOTAL of Receipts This Page (optional)..... ►

229.89

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. M'BA G GREGOIRE

Mailing Address 35 Linden Road

City State Zip Code
 Lake Zurich IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1116.83

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681772

Amount of Each Receipt this Period

45.06

Full Name (Last, First, Middle Initial)

B. M'BA G GREGOIRE

Mailing Address 35 Linden Road

City State Zip Code
 Lake Zurich IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1161.89

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827553

Amount of Each Receipt this Period

45.06

Full Name (Last, First, Middle Initial)

C. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City State Zip Code
 WESTBURY NY 11590

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fid SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.14

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681560

Amount of Each Receipt this Period

19.59

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City
WESTBURY

State Zip Code
NY 11590

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.73

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827343

Amount of Each Receipt this Period

19.59

Full Name (Last, First, Middle Initial)

B. GREGORY J GUIDOS

Mailing Address 6130 St. Andrews Ct.

City
Ponte Vedra Beach

State Zip Code
FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-AB2B-President Allsta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.97

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681714

Amount of Each Receipt this Period

35.04

Full Name (Last, First, Middle Initial)

C. GREGORY J GUIDOS

Mailing Address 6130 St. Andrews Ct.

City
Ponte Vedra Beach

State Zip Code
FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-AB2B-President Allsta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.01

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827496

Amount of Each Receipt this Period

35.04

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City	State	Zip Code
Northbrook	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation & Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1648.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681813

Amount of Each Receipt this Period

66.35

Full Name (Last, First, Middle Initial)

B. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City	State	Zip Code
Northbrook	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation & Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1715.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827594

Amount of Each Receipt this Period

66.35

Full Name (Last, First, Middle Initial)

C. JAMES W HAIDU

Mailing Address 3 South Wynstone

City	State	Zip Code
N. BARRINGTON	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PO-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681678

Amount of Each Receipt this Period

11.17

SUBTOTAL of Receipts This Page (optional)..... ►

143.87

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES W HAIDU

Mailing Address 3 South Wynstone

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-PO-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.43

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827461

Amount of Each Receipt this Period

11.17

Full Name (Last, First, Middle Initial)

B. ROBERT R HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.97

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681692

Amount of Each Receipt this Period

18.54

Full Name (Last, First, Middle Initial)

C. ROBERT R HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.51

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827475

Amount of Each Receipt this Period

18.54

SUBTOTAL of Receipts This Page (optional)..... ►

48.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 197

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. David S Harper

Mailing Address 41 Lancaster Lane

City	State	Zip Code
Lincolnshire	IL	60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1721.41

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681799

Amount of Each Receipt this Period

69.22

Full Name (Last, First, Middle Initial)

B. David S Harper

Mailing Address 41 Lancaster Lane

City	State	Zip Code
Lincolnshire	IL	60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1790.63

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827580

Amount of Each Receipt this Period

69.22

Full Name (Last, First, Middle Initial)

C. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City	State	Zip Code
Long Grove	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-ABO-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1646.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681809

Amount of Each Receipt this Period

66.12

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

204.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code
 Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 SVP-ABO-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1712.37

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827590

Amount of Each Receipt this Period

66.12

Full Name (Last, First, Middle Initial)

B. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code
 Chicago IL 60642

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CR-Strategic Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.60

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681789

Amount of Each Receipt this Period

19.26

Full Name (Last, First, Middle Initial)

C. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code
 Chicago IL 60642

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CR-Strategic Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.86

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827570

Amount of Each Receipt this Period

19.26

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.64

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City

Ponte Vedra

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AB2B-Allstate Benefits

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1001.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			11			2015					

Transaction ID : A2015-2681609

Amount of Each Receipt this Period

40.21

Full Name (Last, First, Middle Initial)

B. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City

Ponte Vedra

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AB2B-Allstate Benefits

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1041.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827393

Amount of Each Receipt this Period

40.21

Full Name (Last, First, Middle Initial)

C. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City

CASTLE ROCK

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

445.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			11			2015					

Transaction ID : A2015-2681564

Amount of Each Receipt this Period

17.94

SUBTOTAL of Receipts This Page (optional)..... ►

98.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City

CASTLE ROCK

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827347

Amount of Each Receipt this Period

17.94

Full Name (Last, First, Middle Initial)

B. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City

Olympia

State

WA

Zip Code

98506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

851.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681816

Amount of Each Receipt this Period

34.23

Full Name (Last, First, Middle Initial)

c. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City

Olympia

State

WA

Zip Code

98506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

885.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827597

Amount of Each Receipt this Period

34.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Audit-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.41

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681539

Amount of Each Receipt this Period

17.71

Full Name (Last, First, Middle Initial)

B. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Audit-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827321

Amount of Each Receipt this Period

17.71

Full Name (Last, First, Middle Initial)

C. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City State Zip Code
BELLWOOD IL 60104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Quality & Compliance-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681636

Amount of Each Receipt this Period

17.81

SUBTOTAL of Receipts This Page (optional)..... ►

53.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City
BELLWOODState
ILZip Code
60104FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Quality & Compliance-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827419

Amount of Each Receipt this Period

17.81

Full Name (Last, First, Middle Initial)

B. EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City
WirtzState
VAZip Code
24184FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ent Svc-Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681587

Amount of Each Receipt this Period

17.25

Full Name (Last, First, Middle Initial)

C. EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City
WirtzState
VAZip Code
24184FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ent Svc-Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827371

Amount of Each Receipt this Period

17.25

SUBTOTAL of Receipts This Page (optional)..... ►

52.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PO-Regional Product M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3569.35

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681592

Amount of Each Receipt this Period

143.89

Full Name (Last, First, Middle Initial)

B. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PO-Regional Product M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3713.24

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827376

Amount of Each Receipt this Period

143.89

Full Name (Last, First, Middle Initial)

C. Mohamad A Hindawi

Mailing Address 19420 SE 20th Street Apt H70

City

CAMAS

State

WA

Zip Code

98607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Data Science

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 22 / 2015

Transaction ID : A2015-2754727

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

537.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Employment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.03

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681666

Amount of Each Receipt this Period

15.67

Full Name (Last, First, Middle Initial)

B. SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Employment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827449

Amount of Each Receipt this Period

15.67

Full Name (Last, First, Middle Initial)

C. KATHLEEN K HOFFMAN

Mailing Address 796 BRYAN ST.

City
ELMHURST

State Zip Code
IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.34

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681684

Amount of Each Receipt this Period

15.47

SUBTOTAL of Receipts This Page (optional)..... ►

46.81

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN K HOFFMAN

Mailing Address 796 BRYAN ST.

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.81

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827467

Amount of Each Receipt this Period

15.47

Full Name (Last, First, Middle Initial)

B. ROBERT J HOLDEN

Mailing Address 3012 Canton View Walk

City

Marietta

State

GA

Zip Code

30068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681572

Amount of Each Receipt this Period

10.24

Full Name (Last, First, Middle Initial)

C. ROBERT J HOLDEN

Mailing Address 3012 Canton View Walk

City

Marietta

State

GA

Zip Code

30068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.54

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827355

Amount of Each Receipt this Period

10.24

SUBTOTAL of Receipts This Page (optional)..... ►

35.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. FREDERICK M HORD

Mailing Address 22421 35th Drive SE

City	State	Zip Code
Bothell	WA	98021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681616

Amount of Each Receipt this Period

20.38

Full Name (Last, First, Middle Initial)

B. FREDERICK M HORD

Mailing Address 22421 35th Drive SE

City	State	Zip Code
Bothell	WA	98021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827400

Amount of Each Receipt this Period

20.38

Full Name (Last, First, Middle Initial)

C. SAM R HOUK

Mailing Address 1158 CIMARRON DR.

City	State	Zip Code
CARY	IL	60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

LPM-Fin Strategic Ops-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681639

Amount of Each Receipt this Period

32.40

SUBTOTAL of Receipts This Page (optional)..... ►

73.16

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SAM R HOUK

Mailing Address 1158 CIMARRON DR.

City State Zip Code
 CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

LPM-Fin Strategic Ops-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.34

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827422

Amount of Each Receipt this Period

32.40

Full Name (Last, First, Middle Initial)

B. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.11

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681730

Amount of Each Receipt this Period

21.32

Full Name (Last, First, Middle Initial)

C. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.43

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827512

Amount of Each Receipt this Period

21.32

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ADS-Accounting & Finance-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.48

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681583

Amount of Each Receipt this Period

23.46

Full Name (Last, First, Middle Initial)

B. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ADS-Accounting & Finance-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.94

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827367

Amount of Each Receipt this Period

23.46

Full Name (Last, First, Middle Initial)

C. STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Corporate Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1381.77

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681663

Amount of Each Receipt this Period

60.39

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Corporate Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1442.16

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827446

Amount of Each Receipt this Period

60.39

Full Name (Last, First, Middle Initial)

B. MARIANO A IMBARRATO

Mailing Address 10825 CHAUCER DRIVE

City State Zip Code
 WILLOW SPRINGS IL 60480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1296.05

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681651

Amount of Each Receipt this Period

52.29

Full Name (Last, First, Middle Initial)

C. MARIANO A IMBARRATO

Mailing Address 10825 CHAUCER DRIVE

City State Zip Code
 WILLOW SPRINGS IL 60480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1348.34

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827434

Amount of Each Receipt this Period

52.29

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.97

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-General Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.83

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681642

Amount of Each Receipt this Period

32.95

Full Name (Last, First, Middle Initial)

B. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-General Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.78

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827425

Amount of Each Receipt this Period

32.95

Full Name (Last, First, Middle Initial)

C. BOB A JACKSON

Mailing Address 226 Maison Court

City
Altamonte Springs

State
FL

Zip Code
32714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.25

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681754

Amount of Each Receipt this Period

23.85

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

89.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BOB A JACKSON

Mailing Address 226 Maison Court

City State Zip Code
 Altamonte Springs FL 32714

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.10

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827535

Amount of Each Receipt this Period

23.85

Full Name (Last, First, Middle Initial)

B. CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Six Sigma-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.31

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681706

Amount of Each Receipt this Period

14.77

Full Name (Last, First, Middle Initial)

C. CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Six Sigma-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.08

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827488

Amount of Each Receipt this Period

14.77

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES C JAMIESON

Mailing Address 935 Lancaster Rd..

City State Zip Code
Lake Zurich IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Real Estate & Constr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1065.52

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681628

Amount of Each Receipt this Period

42.99

Full Name (Last, First, Middle Initial)

B. JAMES C JAMIESON

Mailing Address 935 Lancaster Rd..

City State Zip Code
Lake Zurich IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Real Estate & Constr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1108.51

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827411

Amount of Each Receipt this Period

42.99

Full Name (Last, First, Middle Initial)

C. Jerry A Johnson

Mailing Address 5233 Tree Way Lane South

City State Zip Code
Jacksonville FL 32258

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.05

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681807

Amount of Each Receipt this Period

18.45

SUBTOTAL of Receipts This Page (optional)..... ►

104.43

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 85 OF 197

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jerry A Johnson

Mailing Address 5233 Tree Way Lane South

City State Zip Code
 Jacksonville FL 32258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827588

Amount of Each Receipt this Period

18.45

Full Name (Last, First, Middle Initial)

B. JAMES W JONSKE

Mailing Address 1217 BARCLAY CIRCLE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Standard Auto

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681718

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

C. JAMES W JONSKE

Mailing Address 1217 BARCLAY CIRCLE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Standard Auto

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827500

Amount of Each Receipt this Period

19.00

SUBTOTAL of Receipts This Page (optional)..... ►

56.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 86 OF 197

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A KANE

Mailing Address 11 Ups N Downs Court

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.22

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681551

Amount of Each Receipt this Period

26.24

Full Name (Last, First, Middle Initial)

B. JOHN A KANE

Mailing Address 11 Ups N Downs Court

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.46

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827333

Amount of Each Receipt this Period

26.24

Full Name (Last, First, Middle Initial)

C. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Compliance-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.36

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681723

Amount of Each Receipt this Period

19.22

SUBTOTAL of Receipts This Page (optional)..... ►

71.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City	State	Zip Code
GRAYSLAKE	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Compliance-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827505

Amount of Each Receipt this Period

19.22

Full Name (Last, First, Middle Initial)

B. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City	State	Zip Code
Hawthorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Life Ins. & Broke

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681804

Amount of Each Receipt this Period

58.66

Full Name (Last, First, Middle Initial)

C. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City	State	Zip Code
Hawthorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Life Ins. & Broke

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1522.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827585

Amount of Each Receipt this Period

58.66

SUBTOTAL of Receipts This Page (optional)..... ►

136.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CRAIG A KELLER

Mailing Address 958 N DEER AVE

City	State	Zip Code
PALATINE	IL	60067

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Corporate Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681785

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

B. CRAIG A KELLER

Mailing Address 958 N DEER AVE

City	State	Zip Code
PALATINE	IL	60067

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Corporate Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827566

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER R KIAH

Mailing Address 221 BRAMPTON LN

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Portfolio Mgmt &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681536

Amount of Each Receipt this Period

59.08

SUBTOTAL of Receipts This Page (optional)..... ▶

117.08

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 89 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER R KIAH

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Portfolio Mgmt &

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1535.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827318

Amount of Each Receipt this Period

59.08

Full Name (Last, First, Middle Initial)

B. BARBARA L KILROY

Mailing Address 25396 W Columbia Bay Drive

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

555.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681585

Amount of Each Receipt this Period

22.37

Full Name (Last, First, Middle Initial)

C. BARBARA L KILROY

Mailing Address 25396 W Columbia Bay Drive

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

578.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827369

Amount of Each Receipt this Period

22.37

SUBTOTAL of Receipts This Page (optional)..... ►

103.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stephen B King

Mailing Address 1620 Monterey

City State Zip Code
 Glenview IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.43

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681793

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

B. Stephen B King

Mailing Address 1620 Monterey

City State Zip Code
 Glenview IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

813.81

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827574

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

C. Brian D Klemstein

Mailing Address 608 Haddon Circle

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company INV-AFCO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.12

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681788

Amount of Each Receipt this Period

16.66

SUBTOTAL of Receipts This Page (optional)..... ►

79.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 91 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Brian D Klemstein

Mailing Address 608 Haddon Circle

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-AFCO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827569

Amount of Each Receipt this Period

16.66

Full Name (Last, First, Middle Initial)

B. STEVEN T KLODZINSKI

Mailing Address 18699 W. State Line Road

City	State	Zip Code
Antioch	IL	60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681675

Amount of Each Receipt this Period

14.43

Full Name (Last, First, Middle Initial)

C. STEVEN T KLODZINSKI

Mailing Address 18699 W. State Line Road

City	State	Zip Code
Antioch	IL	60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827458

Amount of Each Receipt this Period

14.43

SUBTOTAL of Receipts This Page (optional)..... ►

45.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City State Zip Code
 LEBANON PA 17042

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.27

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681576

Amount of Each Receipt this Period

23.47

Full Name (Last, First, Middle Initial)

B. TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City State Zip Code
 LEBANON PA 17042

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.74

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827360

Amount of Each Receipt this Period

23.47

Full Name (Last, First, Middle Initial)

C. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company LifeUWCL-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

996.17

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681750

Amount of Each Receipt this Period

40.14

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 197
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

LifeUWCL-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.31

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827531

Amount of Each Receipt this Period

40.14

Full Name (Last, First, Middle Initial)

B. J Wayne W KULLMAN

Mailing Address 2005 Henley St.

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Strategic Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.71

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681598

Amount of Each Receipt this Period

25.22

Full Name (Last, First, Middle Initial)

C. J Wayne W KULLMAN

Mailing Address 2005 Henley St.

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Strategic Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

652.93

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827382

Amount of Each Receipt this Period

25.22

SUBTOTAL of Receipts This Page (optional)..... ►

90.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD NE

City
ATLANTAState
GAZip Code
30307FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681569

Amount of Each Receipt this Period

16.98

Full Name (Last, First, Middle Initial)

B. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD NE

City
ATLANTAState
GAZip Code
30307FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827352

Amount of Each Receipt this Period

16.98

Full Name (Last, First, Middle Initial)

C. SUSAN L LEES

Mailing Address 1950 Merritt Lane

City
Lake ForestState
ILZip Code
60045FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-L&R-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2858.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681534

Amount of Each Receipt this Period

115.38

SUBTOTAL of Receipts This Page (optional)..... ►

149.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SUSAN L LEES

Mailing Address 1950 Merritt Lane

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-L&R-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2973.96

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827316

Amount of Each Receipt this Period

115.38

Full Name (Last, First, Middle Initial)

B. CHARLES M LITTLE

Mailing Address 20 STONEGATE POINT

City State Zip Code
 HOT SPRINGS AR 71913

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.25

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681737

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

C. Peter G Logotheitis

Mailing Address 2326 Indian Ridge Drive

City State Zip Code
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV Group CIO/CTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1588.91

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681805

Amount of Each Receipt this Period

63.67

SUBTOTAL of Receipts This Page (optional)..... ►

192.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Peter G Logothesis

Mailing Address 2326 Indian Ridge Drive

City	State	Zip Code
Glenview	IL	60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV Group CIO/CTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1652.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827586

Amount of Each Receipt this Period

63.67

Full Name (Last, First, Middle Initial)

B. ANGELA M Lovest

Mailing Address 29 Tullach Place

City	State	Zip Code
Stonebrae	CA	94542

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681578

Amount of Each Receipt this Period

29.65

Full Name (Last, First, Middle Initial)

C. ANGELA M Lovest

Mailing Address 29 Tullach Place

City	State	Zip Code
Stonebrae	CA	94542

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827362

Amount of Each Receipt this Period

29.65

SUBTOTAL of Receipts This Page (optional)..... ►

122.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 97 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RHONDA J LOWE

Mailing Address 2501 Catocin Court Unit 3A

City	State	Zip Code
Frederick	MD	21702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681707

Amount of Each Receipt this Period

16.32

Full Name (Last, First, Middle Initial)

B. RHONDA J LOWE

Mailing Address 2501 Catocin Court Unit 3A

City	State	Zip Code
Frederick	MD	21702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827489

Amount of Each Receipt this Period

16.32

Full Name (Last, First, Middle Initial)

C. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City	State	Zip Code
GLENDAL	CA	91226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681770

Amount of Each Receipt this Period

39.05

SUBTOTAL of Receipts This Page (optional)..... ►

71.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City
GLENDALE

State Zip Code
CA 91226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
L&R-Lit Svcs Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1007.74

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827551

Amount of Each Receipt this Period

39.05

Full Name (Last, First, Middle Initial)

B. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURG

State Zip Code
IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.68

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681674

Amount of Each Receipt this Period

23.39

Full Name (Last, First, Middle Initial)

C. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURG

State Zip Code
IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.07

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827457

Amount of Each Receipt this Period

23.39

SUBTOTAL of Receipts This Page (optional)..... ►

85.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BENJAMIN E LUMICAO

Mailing Address 9655 Woods Drive Unit 708

City State Zip Code
Skokie IL 60077

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.32

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681686

Amount of Each Receipt this Period

36.23

Full Name (Last, First, Middle Initial)

B. BENJAMIN E LUMICAO

Mailing Address 9655 Woods Drive Unit 708

City State Zip Code
Skokie IL 60077

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

939.55

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827469

Amount of Each Receipt this Period

36.23

Full Name (Last, First, Middle Initial)

C. Katherine A Mabe

Mailing Address 2750 Commons Drive

City State Zip Code
Glenview IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company EVP-APL-Allstate Brand Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2916.29

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681803

Amount of Each Receipt this Period

117.69

SUBTOTAL of Receipts This Page (optional)..... ►

190.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Katherine A Mabe

Mailing Address 2750 Commons Drive

City
Glenview

State
IL

Zip Code
60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Allstate Brand Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3033.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827584

Amount of Each Receipt this Period

117.69

Full Name (Last, First, Middle Initial)

B. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City

CASTLE ROCK

State

CO

Zip Code

80104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681729

Amount of Each Receipt this Period

22.90

Full Name (Last, First, Middle Initial)

C. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City

CASTLE ROCK

State

CO

Zip Code

80104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827511

Amount of Each Receipt this Period

22.90

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

163.49

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681635

Amount of Each Receipt this Period

25.31

Full Name (Last, First, Middle Initial)

B. KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.33

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827418

Amount of Each Receipt this Period

25.31

Full Name (Last, First, Middle Initial)

C. Clint J Marlow

Mailing Address 10553 Braeburn Rd

City

Barrington Hills

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681538

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Clint J Marlow

Mailing Address 10553 Braeburn Rd

City

Barrington Hills

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827320

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Rhonda J Masser

Mailing Address 4807 Wildwood Dr

City

McHenry

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1060.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681618

Amount of Each Receipt this Period

42.63

Full Name (Last, First, Middle Initial)

C. Rhonda J Masser

Mailing Address 4807 Wildwood Dr

City

McHenry

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1102.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827402

Amount of Each Receipt this Period

42.63

SUBTOTAL of Receipts This Page (optional)..... ►

105.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS R MATHES

Mailing Address 24671 Salmon River Place

City State Zip Code
Aldie VA 20105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PIM Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.64

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681540

Amount of Each Receipt this Period

18.26

Full Name (Last, First, Middle Initial)

B. THOMAS R MATHES

Mailing Address 24671 Salmon River Place

City State Zip Code
Aldie VA 20105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PIM Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827322

Amount of Each Receipt this Period

18.26

Full Name (Last, First, Middle Initial)

C. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City State Zip Code
LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.95

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681687

Amount of Each Receipt this Period

23.27

SUBTOTAL of Receipts This Page (optional)..... ►

59.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City	State	Zip Code
LAKE BLUFF	IL	60044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827470

Amount of Each Receipt this Period

23.27

Full Name (Last, First, Middle Initial)

B. JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City	State	Zip Code
Hawthorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1071.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681649

Amount of Each Receipt this Period

42.94

Full Name (Last, First, Middle Initial)

C. JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City	State	Zip Code
Hawthorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1114.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827432

Amount of Each Receipt this Period

42.94

SUBTOTAL of Receipts This Page (optional)..... ►

109.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

419.51

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681741

Amount of Each Receipt this Period

16.84

Full Name (Last, First, Middle Initial)

B. LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

436.35

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827522

Amount of Each Receipt this Period

16.84

Full Name (Last, First, Middle Initial)

C. SCOTT A MCCONNELL

Mailing Address 21722 N TIMBER RIDGE CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Manager-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

521.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681615

Amount of Each Receipt this Period

20.92

SUBTOTAL of Receipts This Page (optional)..... ►

54.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SCOTT A MCCONNELL

Mailing Address 21722 N TIMBER RIDGE CT

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827399

Amount of Each Receipt this Period

20.92

Full Name (Last, First, Middle Initial)

B. THOMAS R MCDONNELL

Mailing Address 1519 Lincoln Street

City	State	Zip Code
EVANSTON	IL	60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681728

Amount of Each Receipt this Period

57.51

Full Name (Last, First, Middle Initial)

C. THOMAS R MCDONNELL

Mailing Address 1519 Lincoln Street

City	State	Zip Code
EVANSTON	IL	60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1207.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827510

Amount of Each Receipt this Period

57.51

SUBTOTAL of Receipts This Page (optional)..... ►

135.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City State Zip Code
GAINESVILLE VA 20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Financial Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.48

Date of Receipt

12 / 11 / 2015

Transaction ID : A2015-2681764

Amount of Each Receipt this Period

18.50

Full Name (Last, First, Middle Initial)

B. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City State Zip Code
GAINESVILLE VA 20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Financial Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

12 / 24 / 2015

Transaction ID : A2015-2827545

Amount of Each Receipt this Period

18.50

Full Name (Last, First, Middle Initial)

C. PETER A MCELVAIN

Mailing Address 587 RIFORD ROAD

City State Zip Code
GLEN ELLYN IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.50

Date of Receipt

12 / 11 / 2015

Transaction ID : A2015-2681661

Amount of Each Receipt this Period

45.50

SUBTOTAL of Receipts This Page (optional)..... ►

82.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PETER A MCELVAIN

Mailing Address 587 RIFORD ROAD

City
GLEN ELLYN

State Zip Code
IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827444

Amount of Each Receipt this Period

45.50

Full Name (Last, First, Middle Initial)

B. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City
GURNEE

State Zip Code
IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLAIMS-Centralized Se

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.25

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681758

Amount of Each Receipt this Period

33.48

Full Name (Last, First, Middle Initial)

C. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City
GURNEE

State Zip Code
IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLAIMS-Centralized Se

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.73

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827539

Amount of Each Receipt this Period

33.48

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EVA M MCINTEE

Mailing Address 4109 W Bath Road

City	State	Zip Code
Akron	OH	44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1168.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681756

Amount of Each Receipt this Period

46.81

Full Name (Last, First, Middle Initial)

B. EVA M MCINTEE

Mailing Address 4109 W Bath Road

City	State	Zip Code
Akron	OH	44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827537

Amount of Each Receipt this Period

46.81

Full Name (Last, First, Middle Initial)

C. JEFFREY J MCRAE

Mailing Address 25365 N. Northbridge RD

City	State	Zip Code
Hawthorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV-Technology Strat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681607

Amount of Each Receipt this Period

30.51

SUBTOTAL of Receipts This Page (optional)..... ►

124.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 110 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY J MCRAE

Mailing Address 25365 N. Northbridge RD

City	State	Zip Code
Hawthorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATSV-Technology Strat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

757.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827391

Amount of Each Receipt this Period

30.51

Full Name (Last, First, Middle Initial)

B. Heather M Mejia

Mailing Address 1828 West Huron

City	State	Zip Code
Chicago	IL	60622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

R&RM-Operational Risk-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681791

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

C. Heather M Mejia

Mailing Address 1828 West Huron

City	State	Zip Code
Chicago	IL	60622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

R&RM-Operational Risk-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827572

Amount of Each Receipt this Period

29.00

SUBTOTAL of Receipts This Page (optional)..... ►

88.51

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 111 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jesse E Merten

Mailing Address 76 Logan Loop

City State Zip Code
 Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1798.89

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : A2015-2681806

Amount of Each Receipt this Period

72.00

Full Name (Last, First, Middle Initial)

B. Jesse E Merten

Mailing Address 76 Logan Loop

City State Zip Code
 Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1870.89

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : A2015-2827587

Amount of Each Receipt this Period

72.00

Full Name (Last, First, Middle Initial)

C. HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
 PROSPECT HTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fid SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : A2015-2681668

Amount of Each Receipt this Period

19.92

SUBTOTAL of Receipts This Page (optional)..... ►

163.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City	State	Zip Code
PROSPECT HTS	IL	60070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827451

Amount of Each Receipt this Period

19.92

Full Name (Last, First, Middle Initial)

B. RYAN A MICHEL

Mailing Address 409 E. CHURCH ST.

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681703

Amount of Each Receipt this Period

8.94

Full Name (Last, First, Middle Initial)

C. RYAN A MICHEL

Mailing Address 409 E. CHURCH ST.

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827485

Amount of Each Receipt this Period

8.94

SUBTOTAL of Receipts This Page (optional)..... ►

37.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN W MICHELI

Mailing Address 2245 Hazeltine Drive

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Enterprise Servic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681554

Amount of Each Receipt this Period

22.14

Full Name (Last, First, Middle Initial)

B. JOHN W MICHELI

Mailing Address 2245 Hazeltine Drive

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Enterprise Servic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827336

Amount of Each Receipt this Period

22.14

Full Name (Last, First, Middle Initial)

C. FREDERICK J MILLER

Mailing Address 16343 Smith Mountain Lake Parkway

City

Huddleston

State

VA

Zip Code

24104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681614

Amount of Each Receipt this Period

35.46

SUBTOTAL of Receipts This Page (optional)..... ►

79.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. FREDERICK J MILLER

Mailing Address 16343 Smith Mountain Lake Parkway

City	State	Zip Code
Huddleston	VA	24104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827398

Amount of Each Receipt this Period

35.46

Full Name (Last, First, Middle Initial)

B. STEVEN M MILLER

Mailing Address 655 W Irving Park

City	State	Zip Code
Chicago	IL	60613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681710

Amount of Each Receipt this Period

26.16

Full Name (Last, First, Middle Initial)

C. STEVEN M MILLER

Mailing Address 655 W Irving Park

City	State	Zip Code
Chicago	IL	60613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827492

Amount of Each Receipt this Period

26.16

SUBTOTAL of Receipts This Page (optional)..... ▶

87.78

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. AMY B MILLS

Mailing Address 1145 Norman Lane

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

573.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681776

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

B. AMY B MILLS

Mailing Address 1145 Norman Lane

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827557

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

C. ALLISON MISQUEZ

Mailing Address 578 Patriot Court

City

Gurnee

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681762

Amount of Each Receipt this Period

15.21

SUBTOTAL of Receipts This Page (optional)..... ►

61.37

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALLISON MISQUEZ

Mailing Address 578 Patriot Court

City State Zip Code
 Gurnee IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.11

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827543

Amount of Each Receipt this Period

15.21

Full Name (Last, First, Middle Initial)

B. AMBER L MITCHELL

Mailing Address 922 Cleveland Ave

City State Zip Code
 Park Ridge IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.91

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681784

Amount of Each Receipt this Period

13.44

Full Name (Last, First, Middle Initial)

C. AMBER L MITCHELL

Mailing Address 922 Cleveland Ave

City State Zip Code
 Park Ridge IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.35

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827565

Amount of Each Receipt this Period

13.44

SUBTOTAL of Receipts This Page (optional)..... ►

42.09

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALLISON L MOE

Mailing Address 215 Brampton Lane

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-PO-Product Vice Presid

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.43

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681650

Amount of Each Receipt this Period

31.67

Full Name (Last, First, Middle Initial)

B. ALLISON L MOE

Mailing Address 215 Brampton Lane

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-PO-Product Vice Presid

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.10

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827433

Amount of Each Receipt this Period

31.67

Full Name (Last, First, Middle Initial)

C. JAMES R MOSELEY

Mailing Address 1709 Montclair Blvd

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company HR-Client Partner Field B

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.45

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681595

Amount of Each Receipt this Period

17.67

SUBTOTAL of Receipts This Page (optional)..... ►

81.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES R MOSELEY

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827379

Amount of Each Receipt this Period

17.67

Full Name (Last, First, Middle Initial)

B. DAVID J MUELLER

Mailing Address 642 Maple Lane

City

Batavia

State

IL

Zip Code

60510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.53

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681654

Amount of Each Receipt this Period

16.15

Full Name (Last, First, Middle Initial)

C. DAVID J MUELLER

Mailing Address 642 Maple Lane

City

Batavia

State

IL

Zip Code

60510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.68

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827437

Amount of Each Receipt this Period

16.15

SUBTOTAL of Receipts This Page (optional)..... ►

49.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOKState Zip Code
IL 60062FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-State Filings-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	1		2	0	1	5		

Transaction ID : A2015-2681588

Amount of Each Receipt this Period

42.47

Full Name (Last, First, Middle Initial)

B. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOKState Zip Code
IL 60062FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-State Filings-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.13

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	2		2	0	1	5		

Transaction ID : A2015-2827372

Amount of Each Receipt this Period

42.47

Full Name (Last, First, Middle Initial)

C. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOKState Zip Code
IL 60062FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	1		2	0	1	5		

Transaction ID : A2015-2681632

Amount of Each Receipt this Period

45.77

SUBTOTAL of Receipts This Page (optional)..... ►

130.71

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City
NORTHBROOK

State Zip Code
IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1185.97

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827415

Amount of Each Receipt this Period

45.77

Full Name (Last, First, Middle Initial)

B. JAMES E MURRAY

Mailing Address 23665 N. HILLFARM RD

City
LAKE BARRINGTON

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLAIMS-Claims Executiv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1231.25

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681533

Amount of Each Receipt this Period

56.07

Full Name (Last, First, Middle Initial)

C. JAMES E MURRAY

Mailing Address 23665 N. HILLFARM RD

City
LAKE BARRINGTON

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLAIMS-Claims Executiv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1287.32

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827315

Amount of Each Receipt this Period

56.07

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.91

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City

WEST CHICAGO

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.07

Date of Receipt

12 / 11 / 2015

Transaction ID : A2015-2681667

Amount of Each Receipt this Period

16.14

Full Name (Last, First, Middle Initial)

B. DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City

WEST CHICAGO

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.21

Date of Receipt

12 / 24 / 2015

Transaction ID : A2015-2827450

Amount of Each Receipt this Period

16.14

Full Name (Last, First, Middle Initial)

C. DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-L&R-Protection Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1715.97

Date of Receipt

12 / 11 / 2015

Transaction ID : A2015-2681702

Amount of Each Receipt this Period

69.06

SUBTOTAL of Receipts This Page (optional)..... ►

101.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City
NORTHBROOKState Zip Code
IL 60062FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-L&R-Protection Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1785.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827484

Amount of Each Receipt this Period

69.06

Full Name (Last, First, Middle Initial)

B. DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City
LAKE BARRINGTONState Zip Code
IL 60010FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-ATSV-Bus Prtn-Busines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1424.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681625

Amount of Each Receipt this Period

74.95

Full Name (Last, First, Middle Initial)

C. DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City
LAKE BARRINGTONState Zip Code
IL 60010FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-ATSV-Bus Prtn-Busines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827408

Amount of Each Receipt this Period

74.95

SUBTOTAL of Receipts This Page (optional)..... ►

218.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stephanie D Neely

Mailing Address 1140 E 44th St.

City State Zip Code
 Chicago IL 60653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Assistant Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.98

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : A2015-2681822

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

B. Stephanie D Neely

Mailing Address 1140 E 44th St.

City State Zip Code
 Chicago IL 60653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Assistant Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.06

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : A2015-2827603

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

C. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City State Zip Code
 DEER PARK IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-L&R-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1627.24

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : A2015-2681744

Amount of Each Receipt this Period

65.32

SUBTOTAL of Receipts This Page (optional)..... ►

111.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City
DEER PARK

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-L&R-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1692.56

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827525

Amount of Each Receipt this Period

65.32

Full Name (Last, First, Middle Initial)

B. KIMBERLY A O'BRIEN

Mailing Address 2250 Brimstone Place

City
Hanover

State Zip Code
MD 21076

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681623

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

C. KIMBERLY A O'BRIEN

Mailing Address 2250 Brimstone Place

City
Hanover

State Zip Code
MD 21076

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827406

Amount of Each Receipt this Period

29.00

SUBTOTAL of Receipts This Page (optional)..... ►

123.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.94

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681689

Amount of Each Receipt this Period

11.77

Full Name (Last, First, Middle Initial)

B. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.71

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827472

Amount of Each Receipt this Period

11.77

Full Name (Last, First, Middle Initial)

C. MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional HO-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.51

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681634

Amount of Each Receipt this Period

16.63

SUBTOTAL of Receipts This Page (optional)..... ►

40.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City State Zip Code
 Evanston IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional HO-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.14

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827417

Amount of Each Receipt this Period

16.63

Full Name (Last, First, Middle Initial)

B. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.60

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681610

Amount of Each Receipt this Period

42.23

Full Name (Last, First, Middle Initial)

C. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1094.83

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827394

Amount of Each Receipt this Period

42.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.09

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAMELA J OVERTON

Mailing Address 1677 Lee Road

City

Clearwater

State

FL

Zip Code

33765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1309.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681606

Amount of Each Receipt this Period

52.66

Full Name (Last, First, Middle Initial)

B. PAMELA J OVERTON

Mailing Address 1677 Lee Road

City

Clearwater

State

FL

Zip Code

33765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1361.82

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827390

Amount of Each Receipt this Period

52.66

Full Name (Last, First, Middle Initial)

C. LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Homeowners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1185.49

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681697

Amount of Each Receipt this Period

47.67

SUBTOTAL of Receipts This Page (optional)..... ►

152.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Opal G Perry

Mailing Address 2775 N. Sanders Rd.

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATSV-International COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1209.90

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681811

Amount of Each Receipt this Period

48.61

Full Name (Last, First, Middle Initial)

B. Opal G Perry

Mailing Address 2775 N. Sanders Rd.

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATSV-International COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1258.51

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827592

Amount of Each Receipt this Period

48.61

Full Name (Last, First, Middle Initial)

C. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.56

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681779

Amount of Each Receipt this Period

36.35

SUBTOTAL of Receipts This Page (optional)..... ►

133.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

941.91

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827560

Amount of Each Receipt this Period

36.35

Full Name (Last, First, Middle Initial)

B. STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1429.73

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681557

Amount of Each Receipt this Period

57.49

Full Name (Last, First, Middle Initial)

C. STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1487.22

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827339

Amount of Each Receipt this Period

57.49

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. NANCY W PHILLIPS

Mailing Address 102 RIVER OAKS RD

City

BRENTWOOD

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681605

Amount of Each Receipt this Period

34.76

Full Name (Last, First, Middle Initial)

B. NANCY W PHILLIPS

Mailing Address 102 RIVER OAKS RD

City

BRENTWOOD

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827389

Amount of Each Receipt this Period

34.76

Full Name (Last, First, Middle Initial)

C. JOHN C PINTOZZI

Mailing Address 2114 W Cortland ST

City

CHICAGO

State

IL

Zip Code

60647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1046.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681624

Amount of Each Receipt this Period

41.84

SUBTOTAL of Receipts This Page (optional)..... ►

111.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN C PINTOZZI

Mailing Address 2114 W Cortland ST

City
CHICAGOState Zip Code
IL 60647FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1087.84

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827407

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

B. RICHARD E PORTER

Mailing Address 20827 36TH PL W

City
LYNNWOODState Zip Code
WA 98036FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Adj TPLC Rep-Sr Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.76

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681759

Amount of Each Receipt this Period

11.41

Full Name (Last, First, Middle Initial)

C. RICHARD E PORTER

Mailing Address 20827 36TH PL W

City
LYNNWOODState Zip Code
WA 98036FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Adj TPLC Rep-Sr Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.17

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827540

Amount of Each Receipt this Period

11.41

SUBTOTAL of Receipts This Page (optional)..... ►

64.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN M POZZI

Mailing Address 12 Shenandoah Lane

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681535

Amount of Each Receipt this Period

21.02

Full Name (Last, First, Middle Initial)

B. BRIAN M POZZI

Mailing Address 12 Shenandoah Lane

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827317

Amount of Each Receipt this Period

21.02

Full Name (Last, First, Middle Initial)

C. DAVID J PRENDERGAST

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-ABD-Pres. Eastern Ter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2111.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681552

Amount of Each Receipt this Period

84.74

SUBTOTAL of Receipts This Page (optional)..... ►

126.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID J PRENDERGAST

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-ABD-Pres. Eastern Ter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2195.77

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827334

Amount of Each Receipt this Period

84.74

Full Name (Last, First, Middle Initial)

B. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.69

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681699

Amount of Each Receipt this Period

27.99

Full Name (Last, First, Middle Initial)

C. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

724.68

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827481

Amount of Each Receipt this Period

27.99

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.72

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY JO J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City	State	Zip Code
ARLINGTON HEIGH	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1233.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681721

Amount of Each Receipt this Period

49.64

Full Name (Last, First, Middle Initial)

B. MARY JO J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City	State	Zip Code
ARLINGTON HEIGH	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1283.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827503

Amount of Each Receipt this Period

49.64

Full Name (Last, First, Middle Initial)

C. CHARLES E RICE

Mailing Address 1601 Dorset Drive

City	State	Zip Code
Tarrytown	NY	10591

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Mgmt Adjusting CSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681562

Amount of Each Receipt this Period

8.84

SUBTOTAL of Receipts This Page (optional)..... ►

108.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 OF 197

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHARLES E RICE

Mailing Address 1601 Dorset Drive

City	State	Zip Code
Tarrytown	NY	10591

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Mgmt Adjusting CSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827345

Amount of Each Receipt this Period

8.84

Full Name (Last, First, Middle Initial)

B. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City	State	Zip Code
OAK LAWN	IL	60453

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1642.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681653

Amount of Each Receipt this Period

66.60

Full Name (Last, First, Middle Initial)

C. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City	State	Zip Code
OAK LAWN	IL	60453

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1709.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827436

Amount of Each Receipt this Period

66.60

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

142.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kendra L Roberts

Mailing Address One North O'Plaine Road #7894

City	State	Zip Code
Gurnee	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681792

Amount of Each Receipt this Period

23.13

Full Name (Last, First, Middle Initial)

B. Kendra L Roberts

Mailing Address One North O'Plaine Road #7894

City	State	Zip Code
Gurnee	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827573

Amount of Each Receipt this Period

23.13

Full Name (Last, First, Middle Initial)

C. ROGER S ROBINSON

Mailing Address 535 6th Street North

City	State	Zip Code
St. Petersburg	FL	33701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Regional Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681599

Amount of Each Receipt this Period

28.22

SUBTOTAL of Receipts This Page (optional)..... ►

74.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 137 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROGER S ROBINSON

Mailing Address 535 6th Street North

City	State	Zip Code
St. Petersburg	FL	33701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Regional Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827383

Amount of Each Receipt this Period

28.22

Full Name (Last, First, Middle Initial)

B. GREGORY C ROHLFING

Mailing Address 1615 N 78th Ct

City	State	Zip Code
Elmwood Park	IL	60707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			11			2015					

Transaction ID : A2015-2681621

Amount of Each Receipt this Period

46.90

Full Name (Last, First, Middle Initial)

C. GREGORY C ROHLFING

Mailing Address 1615 N 78th Ct

City	State	Zip Code
Elmwood Park	IL	60707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1212.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827404

Amount of Each Receipt this Period

46.90

SUBTOTAL of Receipts This Page (optional)..... ►

122.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 OF 197
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City State Zip Code
 DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1099.25

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681681

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

B. JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City State Zip Code
 DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1143.22

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827464

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

C. DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code
 BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.82

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681749

Amount of Each Receipt this Period

15.06

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code
 BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.88

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827530

Amount of Each Receipt this Period

15.06

Full Name (Last, First, Middle Initial)

B. CASSANDRA C RUSSELL

Mailing Address 2579 E Kaibab PI

City State Zip Code
 Chandler AZ 85249

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.58

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681734

Amount of Each Receipt this Period

19.68

Full Name (Last, First, Middle Initial)

C. CASSANDRA C RUSSELL

Mailing Address 2579 E Kaibab PI

City State Zip Code
 Chandler AZ 85249

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.26

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827516

Amount of Each Receipt this Period

19.68

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 140 OF 197

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.33

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681620

Amount of Each Receipt this Period

46.73

Full Name (Last, First, Middle Initial)

B. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1211.06

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827403

Amount of Each Receipt this Period

46.73

Full Name (Last, First, Middle Initial)

C. Donald D Sands

Mailing Address 321 North Brainard Avenue

City

Lagrange Park

State

IL

Zip Code

60526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Strategic Dist. Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.84

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681800

Amount of Each Receipt this Period

59.08

SUBTOTAL of Receipts This Page (optional)..... ►

152.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Donald D Sands

Mailing Address 321 North Brainard Avenue

City	State	Zip Code
Lagrange Park	IL	60526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Strategic Dist. Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1534.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827581

Amount of Each Receipt this Period

59.08

Full Name (Last, First, Middle Initial)

B. PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City	State	Zip Code
LISLE	IL	60532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Environmental Sci-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681716

Amount of Each Receipt this Period

16.20

Full Name (Last, First, Middle Initial)

C. PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City	State	Zip Code
LISLE	IL	60532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Environmental Sci-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827498

Amount of Each Receipt this Period

16.20

SUBTOTAL of Receipts This Page (optional)..... ►

91.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City

Tierra Verde

State

FL

Zip Code

33715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLAIMS-Encompass Claim

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

445.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681655

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

B. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City

Tierra Verde

State

FL

Zip Code

33715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLAIMS-Encompass Claim

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

463.81

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827438

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

C. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1521.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681574

Amount of Each Receipt this Period

61.04

SUBTOTAL of Receipts This Page (optional)..... ►

96.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1582.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827358

Amount of Each Receipt this Period

61.04

Full Name (Last, First, Middle Initial)

B. DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City	State	Zip Code
Flemington	NJ	08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681748

Amount of Each Receipt this Period

22.53

Full Name (Last, First, Middle Initial)

C. DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City	State	Zip Code
Flemington	NJ	08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827529

Amount of Each Receipt this Period

22.53

SUBTOTAL of Receipts This Page (optional)..... ►

106.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City
CHICAGOState Zip Code
IL 60631FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1449.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681652

Amount of Each Receipt this Period

58.38

Full Name (Last, First, Middle Initial)

B. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City
CHICAGOState Zip Code
IL 60631FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1508.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827435

Amount of Each Receipt this Period

58.38

Full Name (Last, First, Middle Initial)

C. DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City
PhoenixvilleState Zip Code
PA 19460FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1392.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681727

Amount of Each Receipt this Period

55.91

SUBTOTAL of Receipts This Page (optional)..... ►

172.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1448.76

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827509

Amount of Each Receipt this Period

55.91

Full Name (Last, First, Middle Initial)

B. ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strat Deployment-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.29

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681561

Amount of Each Receipt this Period

18.42

Full Name (Last, First, Middle Initial)

C. ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strat Deployment-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.71

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827344

Amount of Each Receipt this Period

18.42

SUBTOTAL of Receipts This Page (optional)..... ►

92.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Corinne L Scott

Mailing Address 2173 Ranch View Drive

City State Zip Code
 Rocklin CA 95765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.84

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681796

Amount of Each Receipt this Period

16.36

Full Name (Last, First, Middle Initial)

B. Corinne L Scott

Mailing Address 2173 Ranch View Drive

City State Zip Code
 Rocklin CA 95765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.20

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827577

Amount of Each Receipt this Period

16.36

Full Name (Last, First, Middle Initial)

C. Obie A Scott

Mailing Address 2173 Ranch View Dr.

City State Zip Code
 Rocklin CA 95765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

792.35

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681769

Amount of Each Receipt this Period

31.82

SUBTOTAL of Receipts This Page (optional)..... ►

64.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Obie A Scott

Mailing Address 2173 Ranch View Dr.

City State Zip Code
 Rocklin CA 95765

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company ABD-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.17

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827550

Amount of Each Receipt this Period

31.82

Full Name (Last, First, Middle Initial)

B. LARRY M SEDILLO

Mailing Address 7005 Sanctuary Heights Road

City State Zip Code
 Fort Worth TX 76132

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.69

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681740

Amount of Each Receipt this Period

8.65

Full Name (Last, First, Middle Initial)

C. LARRY M SEDILLO

Mailing Address 7005 Sanctuary Heights Road

City State Zip Code
 Fort Worth TX 76132

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.34

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827521

Amount of Each Receipt this Period

8.65

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.12

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STACY Y SHARPE

Mailing Address 1100 N. Lake Shore Drive

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681677

Amount of Each Receipt this Period

58.52

Full Name (Last, First, Middle Initial)

B. STACY Y SHARPE

Mailing Address 1100 N. Lake Shore Drive

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1508.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827460

Amount of Each Receipt this Period

58.52

Full Name (Last, First, Middle Initial)

C. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City	State	Zip Code
WHEATON	IL	60189

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4327.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681658

Amount of Each Receipt this Period

173.08

SUBTOTAL of Receipts This Page (optional)..... ►

290.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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 for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

 City State Zip Code
 WHEATON IL 60189

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.08

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827441

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

B. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

 City State Zip Code
 HIGHLAND PARK IL 60035

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.94

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681617

Amount of Each Receipt this Period

22.74

Full Name (Last, First, Middle Initial)

C. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

 City State Zip Code
 HIGHLAND PARK IL 60035

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.68

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827401

Amount of Each Receipt this Period

22.74

SUBTOTAL of Receipts This Page (optional)..... ►

218.56

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ADAM R SHORES

Mailing Address 680 Brookstone Road

City
GrayslakeState
ILZip Code
60030FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Public Affairs-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

739.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681775

Amount of Each Receipt this Period

29.72

Full Name (Last, First, Middle Initial)

B. ADAM R SHORES

Mailing Address 680 Brookstone Road

City
GrayslakeState
ILZip Code
60030FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Public Affairs-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827556

Amount of Each Receipt this Period

29.72

Full Name (Last, First, Middle Initial)

C. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City
FAIR OAKSState
CAZip Code
95628FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO Fld-FPMO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681713

Amount of Each Receipt this Period

24.67

SUBTOTAL of Receipts This Page (optional)..... ►

84.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
 FAIR OAKS CA 95628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO Fld-FPMO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827495

Amount of Each Receipt this Period

24.67

Full Name (Last, First, Middle Initial)

B. JAVIER SILVA

Mailing Address 3549 N. OZANAM

City State Zip Code
 CHICAGO IL 60634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ent Svc-Leader-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681629

Amount of Each Receipt this Period

14.12

Full Name (Last, First, Middle Initial)

C. JAVIER SILVA

Mailing Address 3549 N. OZANAM

City State Zip Code
 CHICAGO IL 60634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ent Svc-Leader-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827412

Amount of Each Receipt this Period

14.12

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.91

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT L SIMMONS

Mailing Address 1146 39th Ave NE

City State Zip Code
 St Petersburg FL 33703

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.96

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681568

Amount of Each Receipt this Period

37.09

Full Name (Last, First, Middle Initial)

B. ROBERT L SIMMONS

Mailing Address 1146 39th Ave NE

City State Zip Code
 St Petersburg FL 33703

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.05

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827351

Amount of Each Receipt this Period

37.09

Full Name (Last, First, Middle Initial)

C. JOHN G SINICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City State Zip Code
 FREDERICK MD 21702

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company Claims-Mgmt OS Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.12

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681604

Amount of Each Receipt this Period

13.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN G SINICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City State Zip Code
FREDERICK MD 21702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Mgmt OS Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.54

Date of Receipt

12 / 24 / 2015

Transaction ID : A2015-2827388

Amount of Each Receipt this Period

13.42

Full Name (Last, First, Middle Initial)

B. KIMBERLY J SLOANE

Mailing Address 650 Rochelle Terrace

City State Zip Code
LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Risk Mgmt-Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.31

Date of Receipt

12 / 11 / 2015

Transaction ID : A2015-2681673

Amount of Each Receipt this Period

32.65

Full Name (Last, First, Middle Initial)

C. KIMBERLY J SLOANE

Mailing Address 650 Rochelle Terrace

City State Zip Code
LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Risk Mgmt-Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.96

Date of Receipt

12 / 24 / 2015

Transaction ID : A2015-2827456

Amount of Each Receipt this Period

32.65

SUBTOTAL of Receipts This Page (optional)..... ►

78.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANN M SMITH

Mailing Address 16801 Carmichael Place

City State Zip Code
Purcellville VA 20132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Sales Administrative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681541

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

B. ANN M SMITH

Mailing Address 16801 Carmichael Place

City State Zip Code
Purcellville VA 20132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Sales Administrative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827323

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

C. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.53

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681731

Amount of Each Receipt this Period

39.75

SUBTOTAL of Receipts This Page (optional)..... ►

70.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1028.28

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827513

Amount of Each Receipt this Period

39.75

Full Name (Last, First, Middle Initial)

B. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp Gov Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.65

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681659

Amount of Each Receipt this Period

19.75

Full Name (Last, First, Middle Initial)

C. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp Gov Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827442

Amount of Each Receipt this Period

19.75

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.25

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH D SMITH

Mailing Address 619 N HUMPHREY AVE.

City	State	Zip Code
OAK PARK	IL	60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Architect & Constr-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681679

Amount of Each Receipt this Period

17.46

Full Name (Last, First, Middle Initial)

B. KENNETH D SMITH

Mailing Address 619 N HUMPHREY AVE.

City	State	Zip Code
OAK PARK	IL	60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Architect & Constr-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827462

Amount of Each Receipt this Period

17.46

Full Name (Last, First, Middle Initial)

C. RICHARD J SMITH Jr.

Mailing Address 75 N. Lake Ave

City	State	Zip Code
Third Lake	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681736

Amount of Each Receipt this Period

25.22

SUBTOTAL of Receipts This Page (optional)..... ►

60.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 157 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD J SMITH Jr.

Mailing Address 75 N. Lake Ave

City	State	Zip Code
Third Lake	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827518

Amount of Each Receipt this Period

25.22

Full Name (Last, First, Middle Initial)

B. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PO-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2472.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681722

Amount of Each Receipt this Period

99.82

Full Name (Last, First, Middle Initial)

C. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PO-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2571.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827504

Amount of Each Receipt this Period

99.82

SUBTOTAL of Receipts This Page (optional)..... ►

224.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM R SPARKS

Mailing Address 2279 ENLUND DRIVE #2

City

PALATINE

State

IL

Zip Code

60074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.45

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681608

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. WILLIAM R SPARKS

Mailing Address 2279 ENLUND DRIVE #2

City

PALATINE

State

IL

Zip Code

60074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.45

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827392

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City

GLENVIEW

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1007.47

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681695

Amount of Each Receipt this Period

40.36

SUBTOTAL of Receipts This Page (optional)..... ►

80.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
 GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1047.83

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827478

Amount of Each Receipt this Period

40.36

Full Name (Last, First, Middle Initial)

B. BRIAN M SPENCE

Mailing Address 2936 N. Lincoln Ave.

City State Zip Code
 Chicago IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Corp Strategy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.54

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681709

Amount of Each Receipt this Period

31.99

Full Name (Last, First, Middle Initial)

C. BRIAN M SPENCE

Mailing Address 2936 N. Lincoln Ave.

City State Zip Code
 Chicago IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Corp Strategy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.53

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827491

Amount of Each Receipt this Period

31.99

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Gilda L Spencer

Mailing Address 1675 N. Pebble Beach Way

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-L&R-Dispute Resolutio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.74

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681814

Amount of Each Receipt this Period

32.76

Full Name (Last, First, Middle Initial)

B. Gilda L Spencer

Mailing Address 1675 N. Pebble Beach Way

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-L&R-Dispute Resolutio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.50

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827595

Amount of Each Receipt this Period

32.76

Full Name (Last, First, Middle Initial)

C. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATSV-Bus Prtn-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1554.96

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681612

Amount of Each Receipt this Period

62.31

SUBTOTAL of Receipts This Page (optional)..... ►

127.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 161 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATSV-Bus Prtn-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1617.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827396

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

B. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City	State	Zip Code
ATLANTIC BEACH	FL	32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1132.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681601

Amount of Each Receipt this Period

45.45

Full Name (Last, First, Middle Initial)

C. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City	State	Zip Code
ATLANTIC BEACH	FL	32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827385

Amount of Each Receipt this Period

45.45

SUBTOTAL of Receipts This Page (optional)..... ►

153.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A STOLTE

Mailing Address 330 KAREN WAY

City
TIBURONState
CAZip Code
94920FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681763

Amount of Each Receipt this Period

20.41

Full Name (Last, First, Middle Initial)

B. JOHN A STOLTE

Mailing Address 330 KAREN WAY

City
TIBURONState
CAZip Code
94920FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827544

Amount of Each Receipt this Period

20.41

Full Name (Last, First, Middle Initial)

C. MYRON E STOUFFER

Mailing Address 324 W. Cook

City
LIBERTYVILLEState
ILZip Code
60048FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Indpt. Agencies &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681597

Amount of Each Receipt this Period

32.98

SUBTOTAL of Receipts This Page (optional)..... ►

73.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MYRON E STOUFFER

Mailing Address 324 W. Cook

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Indpt. Agencies &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.16

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827381

Amount of Each Receipt this Period

32.98

Full Name (Last, First, Middle Initial)

B. DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City State Zip Code
 SEAFORD NY 11783

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.25

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681563

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

C. DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City State Zip Code
 SEAFORD NY 11783

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.14

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827346

Amount of Each Receipt this Period

13.89

SUBTOTAL of Receipts This Page (optional)..... ►

60.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City
FRANKLIN

State Zip Code
TN 37069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ALR Dist-Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.66

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681631

Amount of Each Receipt this Period

21.02

Full Name (Last, First, Middle Initial)

B. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City
FRANKLIN

State Zip Code
TN 37069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ALR Dist-Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.68

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827414

Amount of Each Receipt this Period

21.02

Full Name (Last, First, Middle Initial)

C. PHILLIP J TELGENHOFF

Mailing Address 141 Lafite Ct.

City
EL DORADO HILLS

State Zip Code
CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.99

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681760

Amount of Each Receipt this Period

8.63

SUBTOTAL of Receipts This Page (optional)..... ►

50.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 165 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PHILLIP J TELGENHOFF

Mailing Address 141 Lafite Ct.

City	State	Zip Code
EL DORADO HILLS	CA	95762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827541

Amount of Each Receipt this Period

8.63

Full Name (Last, First, Middle Initial)

B. Mark J Testa

Mailing Address 9613 185th Dr SE

City	State	Zip Code
Snohomish	WA	98290

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681825

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

C. Mark J Testa

Mailing Address 9613 185th Dr SE

City	State	Zip Code
Snohomish	WA	98290

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827606

Amount of Each Receipt this Period

29.00

SUBTOTAL of Receipts This Page (optional)..... ►

66.63

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 166 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SEAN D THAKUR

Mailing Address 222 S.Caldwell St

City	State	Zip Code
Charlotte	NC	28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ops Supt-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681739

Amount of Each Receipt this Period

20.19

Full Name (Last, First, Middle Initial)

B. SEAN D THAKUR

Mailing Address 222 S.Caldwell St

City	State	Zip Code
Charlotte	NC	28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ops Supt-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827520

Amount of Each Receipt this Period

20.19

Full Name (Last, First, Middle Initial)

C. Joy A Thomas

Mailing Address 2240 Henley Street

City	State	Zip Code
Glenview	IL	60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CC-Connected Car PD-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681794

Amount of Each Receipt this Period

14.87

SUBTOTAL of Receipts This Page (optional)..... ►

55.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 167 OF 197
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Joy A Thomas

Mailing Address 2240 Henley Street

City
GlenviewState
ILZip Code
60025FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CC-Connected Car PD-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827575

Amount of Each Receipt this Period

14.87

Full Name (Last, First, Middle Initial)

B. MICHAEL A THOMAS

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Administration & R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681778

Amount of Each Receipt this Period

27.12

Full Name (Last, First, Middle Initial)

C. MICHAEL A THOMAS

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Administration & R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827559

Amount of Each Receipt this Period

27.12

SUBTOTAL of Receipts This Page (optional)..... ►

69.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

 City
 CHICAGO

 State
 IL

 Zip Code
 60649

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Strategic Bus Comm-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			11			2015					

Transaction ID : A2015-2681647

Amount of Each Receipt this Period

35.13

Full Name (Last, First, Middle Initial)

B. GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

 City
 CHICAGO

 State
 IL

 Zip Code
 60649

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Strategic Bus Comm-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

908.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827430

Amount of Each Receipt this Period

35.13

Full Name (Last, First, Middle Initial)

C. WILLIAM J THOMPSON

Mailing Address 5129 Pine River Trail

 City
 Castle Rock

 State
 CO

 Zip Code
 80108

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1355.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			11			2015					

Transaction ID : A2015-2681594

Amount of Each Receipt this Period

54.69

SUBTOTAL of Receipts This Page (optional)..... ►

124.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 169 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM J THOMPSON

Mailing Address 5129 Pine River Trail

City	State	Zip Code
Castle Rock	CO	80108

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1410.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827378

Amount of Each Receipt this Period

54.69

Full Name (Last, First, Middle Initial)

B. MELINDA S TUNNER

Mailing Address 190 West Johnson Street

City	State	Zip Code
Palatine	IL	60067

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1429.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681735

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

C. MELINDA S TUNNER

Mailing Address 190 West Johnson Street

City	State	Zip Code
Palatine	IL	60067

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABD-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1487.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827517

Amount of Each Receipt this Period

58.00

SUBTOTAL of Receipts This Page (optional)..... ▶

170.69

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City

ENGLEWOOD

State

CO

Zip Code

80111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

579.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681556

Amount of Each Receipt this Period

23.36

Full Name (Last, First, Middle Initial)

B. RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City

ENGLEWOOD

State

CO

Zip Code

80111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

603.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827338

Amount of Each Receipt this Period

23.36

Full Name (Last, First, Middle Initial)

C. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Sup & Proc Des-Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

913.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681660

Amount of Each Receipt this Period

42.58

SUBTOTAL of Receipts This Page (optional)..... ►

89.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 171 OF 197

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Sup & Proc Des-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

956.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827443

Amount of Each Receipt this Period

42.58

Full Name (Last, First, Middle Initial)

B. JEFFREY W URE

Mailing Address 609 S. KENNICOTT AVE

City

ARLINGTON HTS

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681665

Amount of Each Receipt this Period

10.60

Full Name (Last, First, Middle Initial)

C. JEFFREY W URE

Mailing Address 609 S. KENNICOTT AVE

City

ARLINGTON HTS

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827448

Amount of Each Receipt this Period

10.60

SUBTOTAL of Receipts This Page (optional)..... ►

63.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City
INVERNESS

State Zip Code
IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-L&R-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1649.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681656

Amount of Each Receipt this Period

66.23

Full Name (Last, First, Middle Initial)

B. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City
INVERNESS

State Zip Code
IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-L&R-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.13

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827439

Amount of Each Receipt this Period

66.23

Full Name (Last, First, Middle Initial)

C. LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City
CRYSTAL LAKE

State Zip Code
IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681664

Amount of Each Receipt this Period

18.14

SUBTOTAL of Receipts This Page (optional)..... ►

150.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City	State	Zip Code
CRYSTAL LAKE	IL	60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827447

Amount of Each Receipt this Period

18.14

Full Name (Last, First, Middle Initial)

B. PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City	State	Zip Code
Wilmette	IL	60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681753

Amount of Each Receipt this Period

73.59

Full Name (Last, First, Middle Initial)

C. PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City	State	Zip Code
Wilmette	IL	60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1905.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827534

Amount of Each Receipt this Period

73.59

SUBTOTAL of Receipts This Page (optional)..... ►

165.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Ronald A Vargo

Mailing Address 5272 Galloway Drive

City	State	Zip Code
Hoffman Estates	IL	60192

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Architect-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681808

Amount of Each Receipt this Period

16.23

Full Name (Last, First, Middle Initial)

B. Ronald A Vargo

Mailing Address 5272 Galloway Drive

City	State	Zip Code
Hoffman Estates	IL	60192

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATSV-Architect-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827589

Amount of Each Receipt this Period

16.23

Full Name (Last, First, Middle Initial)

C. MICHAEL F VITALE Jr.

Mailing Address 1824 Roy Lane

City	State	Zip Code
Forks Twp.	PA	18040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Encp-Regional Sales Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681581

Amount of Each Receipt this Period

18.61

SUBTOTAL of Receipts This Page (optional)..... ►

51.07

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL F VITALE Jr.

Mailing Address 1824 Roy Lane

City	State	Zip Code
Forks Twp.	PA	18040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Encp-Regional Sales Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827365

Amount of Each Receipt this Period

18.61

Full Name (Last, First, Middle Initial)

B. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Strategic Int-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681698

Amount of Each Receipt this Period

21.15

Full Name (Last, First, Middle Initial)

C. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Strategic Int-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827480

Amount of Each Receipt this Period

21.15

SUBTOTAL of Receipts This Page (optional)..... ►

60.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MKTG-eBusiness & Dire

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1839.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681798

Amount of Each Receipt this Period

73.84

Full Name (Last, First, Middle Initial)

B. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MKTG-eBusiness & Dire

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1913.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827579

Amount of Each Receipt this Period

73.84

Full Name (Last, First, Middle Initial)

C. LEWIS C WEBB II

Mailing Address 1444 El Pardo Dr

City

Trinity

State

FL

Zip Code

34655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Financial Sa

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

459.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681773

Amount of Each Receipt this Period

18.43

SUBTOTAL of Receipts This Page (optional)..... ►

166.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LEWIS C WEBB II

Mailing Address 1444 El Pardo Dr

City	State	Zip Code
Trinity	FL	34655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Regional Financial Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827554

Amount of Each Receipt this Period

18.43

Full Name (Last, First, Middle Initial)

B. BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City	State	Zip Code
RICHMOND	KY	40475

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			11			2015					

Transaction ID : A2015-2681752

Amount of Each Receipt this Period

13.88

Full Name (Last, First, Middle Initial)

C. BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City	State	Zip Code
RICHMOND	KY	40475

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			24			2015					

Transaction ID : A2015-2827533

Amount of Each Receipt this Period

13.88

SUBTOTAL of Receipts This Page (optional)..... ►

46.19

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Mary P Weiss

Mailing Address 5209 Westwood Drive

City
Bethesda

State
MD

Zip Code
20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Legislative & Regu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4864.53

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681819

Amount of Each Receipt this Period

195.08

Full Name (Last, First, Middle Initial)

B. Mary P Weiss

Mailing Address 5209 Westwood Drive

City
Bethesda

State
MD

Zip Code
20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-L&R-Legislative & Regu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827600

Amount of Each Receipt this Period

135.47

Full Name (Last, First, Middle Initial)

C. JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City
ROSWELL

State
GA

Zip Code
30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fid SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681570

Amount of Each Receipt this Period

12.98

SUBTOTAL of Receipts This Page (optional)..... ►

343.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City State Zip Code
ROSWELL GA 30075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.28

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827353

Amount of Each Receipt this Period

12.98

Full Name (Last, First, Middle Initial)

B. CYNTHIA A WHITFIELD

Mailing Address 298 Keswick Grove Lane

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.24

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2015

Transaction ID : A2015-2681566

Amount of Each Receipt this Period

26.84

Full Name (Last, First, Middle Initial)

C. CYNTHIA A WHITFIELD

Mailing Address 298 Keswick Grove Lane

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : A2015-2827349

Amount of Each Receipt this Period

26.84

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City
LIBERTYVILLEState Zip Code
IL 60048FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1182.53

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681633

Amount of Each Receipt this Period

47.51

Full Name (Last, First, Middle Initial)

B. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City
LIBERTYVILLEState Zip Code
IL 60048FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.04

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827416

Amount of Each Receipt this Period

47.51

Full Name (Last, First, Middle Initial)

C. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City
CLARKSVILLEState Zip Code
MD 21029FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1309.83

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681648

Amount of Each Receipt this Period

58.00

SUBTOTAL of Receipts This Page (optional)..... ►

153.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

21029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1367.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827431

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

B. KURT L WINTER

Mailing Address 1403 N. WALNUT

City

ARLINGTON HGHTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MKTG-Regional Marketin

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

586.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681774

Amount of Each Receipt this Period

23.68

Full Name (Last, First, Middle Initial)

C. KURT L WINTER

Mailing Address 1403 N. WALNUT

City

ARLINGTON HGHTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MKTG-Regional Marketin

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

610.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827555

Amount of Each Receipt this Period

23.68

SUBTOTAL of Receipts This Page (optional)..... ►

105.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City	State	Zip Code
West Hartford	CT	06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Pres. The Allstat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4612.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681801

Amount of Each Receipt this Period

184.62

Full Name (Last, First, Middle Initial)

B. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City	State	Zip Code
West Hartford	CT	06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Pres. The Allstat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4796.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827582

Amount of Each Receipt this Period

184.62

Full Name (Last, First, Middle Initial)

C. RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City	State	Zip Code
JOHNSBURG	IL	60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ops Supt-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681694

Amount of Each Receipt this Period

21.64

SUBTOTAL of Receipts This Page (optional)..... ►

390.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ops Supt-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827477

Amount of Each Receipt this Period

21.64

Full Name (Last, First, Middle Initial)

B. BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : A2015-2681691

Amount of Each Receipt this Period

23.41

Full Name (Last, First, Middle Initial)

C. BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : A2015-2827474

Amount of Each Receipt this Period

23.41

SUBTOTAL of Receipts This Page (optional)..... ►

68.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Field Admin-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1090.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681742

Amount of Each Receipt this Period

43.78

Full Name (Last, First, Middle Initial)

B. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABD-Field Admin-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1134.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827523

Amount of Each Receipt this Period

43.78

Full Name (Last, First, Middle Initial)

C. MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ops Supt-Workforce Mgmt-S

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

447.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681565

Amount of Each Receipt this Period

17.95

SUBTOTAL of Receipts This Page (optional)..... ►

105.51

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 185 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ops Supt-Workforce Mgmt-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827348

Amount of Each Receipt this Period

17.95

Full Name (Last, First, Middle Initial)

B. DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City	State	Zip Code
CHICAGO	IL	60660

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Reputation-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681590

Amount of Each Receipt this Period

22.01

Full Name (Last, First, Middle Initial)

C. DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City	State	Zip Code
CHICAGO	IL	60660

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Reputation-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827374

Amount of Each Receipt this Period

22.01

SUBTOTAL of Receipts This Page (optional)..... ►

61.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Data Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.58

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681672

Amount of Each Receipt this Period

66.75

Full Name (Last, First, Middle Initial)

B. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Data Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1725.33

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827455

Amount of Each Receipt this Period

66.75

Full Name (Last, First, Middle Initial)

C. NOEL C YOUNG

Mailing Address 10936 E. Butherus Drive

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.93

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681733

Amount of Each Receipt this Period

38.06

SUBTOTAL of Receipts This Page (optional)..... ►

171.56

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. NOEL C YOUNG

Mailing Address 10936 E. Butherus Drive

City	State	Zip Code
Scottsdale	AZ	85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827515

Amount of Each Receipt this Period

38.06

Full Name (Last, First, Middle Initial)

B. MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Encp-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1130.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : A2015-2681670

Amount of Each Receipt this Period

45.42

Full Name (Last, First, Middle Initial)

C. MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Encp-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : A2015-2827453

Amount of Each Receipt this Period

45.42

SUBTOTAL of Receipts This Page (optional)..... ►

128.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 197

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
 VILLA PARK IL 60181

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.19

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681705

Amount of Each Receipt this Period

21.74

Full Name (Last, First, Middle Initial)

B. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
 VILLA PARK IL 60181

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.93

Date of Receipt

M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : A2015-2827487

Amount of Each Receipt this Period

21.74

Full Name (Last, First, Middle Initial)

C. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City State Zip Code
 AURORA IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1948.20

Date of Receipt

M M / D D / Y Y Y Y Y
 12 11 2015

Transaction ID : A2015-2681726

Amount of Each Receipt this Period

78.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City
AURORAState
ILZip Code
60502FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2026.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827508

Amount of Each Receipt this Period

78.34

Full Name (Last, First, Middle Initial)

B. CARLA A ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Operations Suppor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1256.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : A2015-2681755

Amount of Each Receipt this Period

50.48

Full Name (Last, First, Middle Initial)

C. CARLA A ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Operations Suppor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1306.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2015			

Transaction ID : A2015-2827536

Amount of Each Receipt this Period

50.48

SUBTOTAL of Receipts This Page (optional)..... ►

179.30

TOTAL This Period (last page this line number only)..... ►

20804.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2211 N. 1st Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
PayPal fee for credit card contribution

001

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 22 2015
Transaction ID : B592437

Amount of Each Disbursement this Period

7.55

Full Name (Last, First, Middle Initial)

B. PayPal

Mailing Address 2211 N. 1st Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
PayPal fee for credit card contribution

001

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 29 2015
Transaction ID : B592438

Amount of Each Disbursement this Period

3.20

Full Name (Last, First, Middle Initial)

C. Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement
Bank Service Charge

001

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 10 2015
Transaction ID : B592442

Amount of Each Disbursement this Period

89.90

SUBTOTAL of Disbursements This Page (optional)..... ►

100.65

TOTAL This Period (last page this line number only)..... ►

136.68

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 192 OF 197

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Shelby for U S Senate

Mailing Address 499 South Capitol St SW Suite 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

011

Candidate Name

Richard C ShelbyCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : B589727

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Correa for Congress

Mailing Address 220 I Street NE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

011

Candidate Name

Lou CorreaCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 46

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2015

Transaction ID : B589061

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Majority Committee

Mailing Address 213 Ashby St.

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : B590152

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Blumenthal for Connecticut

Mailing Address 777 Summer Street Suite 302

City	State	Zip Code
Stamford	CT	06901

Purpose of Disbursement
Contribution

Candidate Name

Richard Blumenthal

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CT

District:

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Convention

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2015

Transaction ID : B589060

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Carlos Curbelo Congress

Mailing Address 824 S. Milledge Ave. Ste 101

City	State	Zip Code
Athens	GA	30605

Purpose of Disbursement
Contribution

Candidate Name

Carlos Curbelo

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: FL

District: 26

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : B591577

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. McConnell for Majority Leader Committee

Mailing Address P.O. Box 1496

City	State	Zip Code
Louisville	KY	40201

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State:

District:

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : B590151

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. McHenry Leadership Fund

Mailing Address 228 South Washington St. #115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : B591578

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Pioneer PAC

Mailing Address 217 3rd Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : B591579

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Mulvaney for Congress

Mailing Address 499 South Capitol St. SW Ste 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

John Mulvaney

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: SC District: 05

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : B588804

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►

6000.00

TOTAL This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Jeb Hensarling

Mailing Address PO Box 820504

City	State	Zip Code
Dallas	TX	75382

Purpose of Disbursement
Contribution

011

Candidate Name

Jeb HensarlingCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: TX District: 05

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : B591576

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Ryan For Congress

Mailing Address 1006 Pendleton Street

City	State	Zip Code
Alexandria	DC	22314

Purpose of Disbursement
Contribution

011

Candidate Name

Paul D RyanCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WI District: 01

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : B590150

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Capito for West Virginia

Mailing Address 1006 Pendleton Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Contribution

011

Candidate Name

Shelley Moore CapitoCategory/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: WV District:

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : B588800

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

24000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. The Committee to Elect Brian Bushweller

Mailing Address 103 Burning Tree Road

City Dover	State DE	Zip Code 19904
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Purpose of Disbursement
P-2018 State Senate 17 DE

011

Candidate Name

Brian BushwellerCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: DE District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2015

Transaction ID : B591958

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Morgan Meyer for Texas

Mailing Address 3838 Oaklawn Suite 400

City Dallas	State TX	Zip Code 75219
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Purpose of Disbursement
G-2016 State House 108 TX

011

Candidate Name

Morgan MeyerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : B589701

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Van Taylor Campaign

Mailing Address PO Box 261676

City Plano	State TX	Zip Code 75026
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Purpose of Disbursement
G-2018 State Senate 08 TX

011

Candidate Name

Van TaylorCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : B589700

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Workman for Texas

Mailing Address PO Box 90671

City Austin	State TX	Zip Code 78709
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Purpose of Disbursement
G-2016 State House 47 TX

Candidate Name

Paul Workman

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: TX	District: 47

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
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011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : B589703

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Ave NE

City Washington	State DC	Zip Code 20002
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Purpose of Disbursement
O-2015 Natl Party Cmte-NonFed Acct US

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2015	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
Building Account		

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : B589769

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
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Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

9250.00